Building Stronger Communities Shellharbour:
Our Community, Our Place

Barnardos Australia

Because *every child* needs a champion

Contents

Acknowledgement of Country

Barnardos Australia acknowledges the Traditional Custodians of Dharawal Country, the land on which we live and work.

We recognise the Traditional Owners' continued connection to the land. We pay our respects to Elders past, present and emerging.
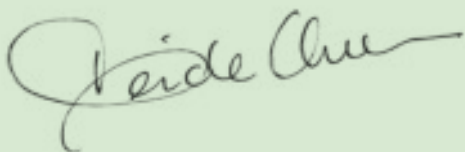
Foreword

Communities for Children is committed to providing the best start in life for the children of Shellharbour through opportunities that will support their development into healthy, well socialised, productive and engaged citizens.

The Australian Government is also committed to a whole of community approach to support and enhance early childhood development and wellbeing for children. A place-based approach has been taken through the Department of Social Services Communities for Children Program, recognising optimal wellbeing depends on a child having a range of personal, social and material resources, to promote a positive developmental trajectory. Therefore, supports and services that are delivered early in a child's life can have a powerful effect on child and family outcomes. Children that flourish are physically healthy, school ready and engage positively with their peers and adults.

Child and family health and wellbeing is influenced by the settings in which people live and the larger contexts in which they are embedded. This Community Consultation was embedded in a strengths-based collective approach as the voices of community were heard. A social ecological framework that supports the notion that child health and wellbeing is influenced by several domains which includes family, friends, neighbourhoods, culture and the wider community was the lens to guide these conversations.

To plan effectively for the children and families of Shellharbour, connecting with community and hearing their voice is of utmost importance. This collective approach is responsive to the needs of community and supports a sense of community empowerment and ownership. With an overarching framework of exploring protective and risk factors, this report seeks to identify the strengths of community, as well as the issues, priorities, and opportunities that have potential to influence child and family health and wellbeing. Founded on the State of Shellharbour's Children Report 2019, this community consultation report will inform future strategic planning and targeted programs that are responsive and reflective. Adopting this whole of community approach and encompassing multiple domains that promote engagement will enable children and families to thrive.

Children and families need to be heard and understood. The vision is to create a community where there are opportunities to thrive and feel a sense of empowerment, safety and belonging, as well as a feeling of being valued and valuable.

Deirdre Cheers
Chief Executive Officer, Barnardos

Acknowledgements

Barnardos Communities for Children would like to thank the following individuals and organisations who have supported and contributed to this consultation. We would also like to thank the many children, young people, families and community members for their valuable contribution to the Individual Consultations, Focus Groups, Surveys and Case Studies. It is by working together that we strengthen opportunities for children and young people to thrive in our community.

- Anna Watson MP - Member for Shellharbour
- Aunty June Lowe OAM, Aboriginal Community Elder and Aboriginal Engagement Officer, Mission Australia, NSW South East
- Aunty Lindy Lawler, Aboriginal Community Elder
- Beyond Empathy
- Communities for Children Shellharbour, Community Partners
- Communities for Children Shellharbour, Consultative Committee Members
- Communities for Children Facilitating Partner, Fairfield
- Communities for Children Facilitating Partner, Miller
- Communities for Children Facilitating Partner, Macarthur
- Department of Communities and Justice (DCJ) Commissioning and Planning – Illawarra Shoalhaven
- ECTARC Children's Services- Alunga Education and Care Service, Wallaroo Education and Care Service, Warilla Education and Care Service
- Ed U Play
- Emma Rattenbury and Barnardos Communities for Children Shellharbour, authors of the State of Shellharbour's Children Report, 2019
- Illawarra Aboriginal Community Based Working Group (IACBWG)
- Karitane – Carramar and Shellharbour
- Cr Marianne Saliba – Mayor Shellharbour Council
- Narelle Clay AM, CEO Southern Youth and Family Services (SYFS)
- Necessity Kids
- Southern Youth and Family Services (SYFS)
- TAFE students (Certificate III in Community Services, Shellharbour TAFE)
- Uncle Richard Davis, Aboriginal Community Elder & Aboriginal Enterprise Development Officer, ITeC
- Warilla North Public School

Executive Summary

The purpose of this report by Communities for Children Shellharbour is to present findings from Community Consultation. Through widespread consultation with children, young people, families and community in the Shellharbour area we can hear the thoughts and ideas of community members and identify strengths, areas of interest and potential opportunities for service delivery and development. By consulting widely with the Shellharbour community, it is envisaged that those working with children, young people and families are informed and better able to provide responsive, targeted and effective programs for children 0-18years.

The consultation was based on The State of Shellharbour's Children Report 2019 (CfC, 2019) and will inform and provide a strong foundation for local Strategic Planning. Applying a strengths-based approach guided by the Harwood Method of Community Engagement (The Harwood Institute, 2019), the consultation was facilitated with an overarching focus on exploring protective and risk factors, and guided by the following questions:

- What are the strengths of the community?
- What is important for community members?
- What are the main issues impacting children, young people and families?
- How can a sense of safety and belonging be created?
- What additional support and programs are needed?

Glossary of Terms

We have endeavoured to be respectful and inclusive in use of language and terminology through this resource. Some terms are used for brevity purposes. Key terms include:

CfC   Communities for Children
ECEC   Early Childhood Education and Care
IACBWG Illawarra Aboriginal Community Based Working Group
SYFS   Southern Youth and Family Services

Child and young person
To be concise and brief in explanations, there are occasions throughout this document where the term 'child' is used to include both children and young people.

Carer and parent
Term used for an adult undertaking the role of parenting and caregiving. This includes biological parents, adoptive parents, foster carers and members of extended family who provide care to children and young people.

Family
The generic term used to describe all types of families. This includes children and young people cared for by single parents, same-sex couples, blended families, co-parents, heterosexual couples, grandparents, older siblings, foster parents, adoptive parents and extended family.

Relative / Kin / Kinship
A person's relationship to others and to Country. A key principle of kinship is that a child will have many mothers and fathers. Kinship is at the heart of Aboriginal and Torres Strait Islander Culture and Community and establishes where a person fits in their Community.

Reference: Adapted from Barnardos Practice Framework (2021).

List of Figures and Tables

Introduction

"Community engagement is based on the democratic idea that everyone who is affected by an issue that impacts their community should have a say in the decision making around it."

(Hussey, 2020, p1)

The focus of this report is to bring together the voices of community members in Shellharbour. The consultation process provides a platform for children, young people, families, community members and service providers to engage in conversation, share and collaborate and to feel empowered, ensuring future planning and resource management is responsive to community and is owned by community. Engaging community is critical in developing an authentic and effective evidence-informed approach in consultation (Fig 1). Conversations with community captures expertise and lived experience, ensuring that programs, policies and services are cohesive, equitable and informed by multiple forms of evidence, making them truly responsive to community need (Australian Institute of Family Studies, 2019).

Figure 1. Evidence-informed approach (Hunter and Carlow, 2018).

A strengths-based approach was adopted for the consultation, guided by the Harwood model for community engagement. Harwood is an evidence-based method of community engagement used extensively in the United States, Canada, and increasingly in Australia (The Harwood Institute, 2019). With this approach, outcomes of the consultation will be responsive, targeted and effective programs for children 0-18years.

The consultation builds upon and was guided by The State of Shellharbour's Children Report 2019 (CfC, 2019), Barnardos Practice Framework (Barnardos, 2021) and ARACY's The Nest framework for children's wellbeing (Goodhue et al., 2021). Like the State of Shellharbour's Children Report 2019 (CfC, 2019), Bronfenbrenner's Social Ecological Theory provided a lens for design of the consultation.

Shellharbour: An Overview

Shellharbour Local Government Area (LGA) continues to be a growing area within the Illawarra. Based on the 2016 census, in 2021 Shellharbour had an Estimated Resident Population (ERP) of 75 953 and is forecast to grow by approximately 25% to 94 877 by 2041 (ABS, 2020; Shellharbour City Council, 2021). Located approximately 100km south of Sydney, Shellharbour can provide families with a cheaper living option whilst working within the Wollongong or Sydney CBD areas. All data within this report describes the Shellharbour LGA, unless stated otherwise.

Shellharbour includes the suburbs and rural localities of Albion Park, Albion Park Rail, Barrack Heights, Barrack Point, Blackbutt, Calderwood, Croom, Dunmore, Flinders, Lake Illawarra, Macquarie Pass, Mount Warrigal, North Macquarie, Oak Flats, Shell Cove, Shellharbour, Shellharbour City Centre, Tongarra, Tullimbar, Warilla and Yellow Rock.

■ Shellharbour City

Image source: https://profile.id.com.au/shellharbour/about

Welcome to
Shellharbour

The State of Shellharbour's Children Report 2019

We acknowledge the work of Emma Rattenbury and
Barnardos Communities for Children Shellharbour, authors of this report.
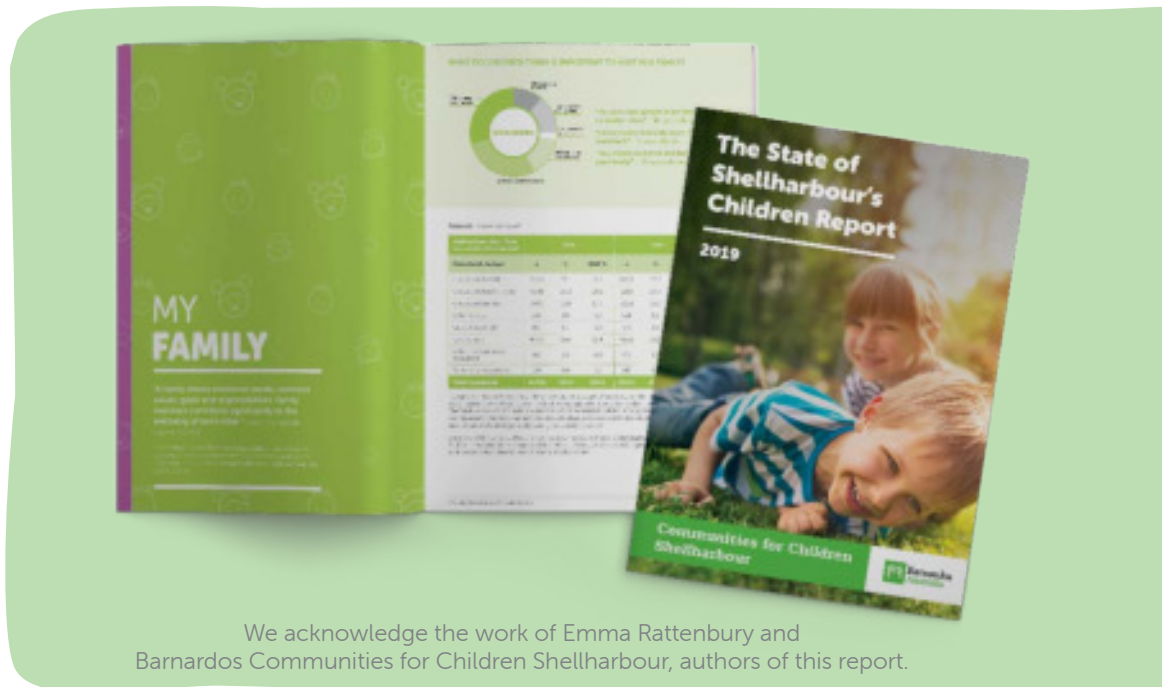
The objective of the State of the Shellharbour's Children Report 2019 was to bring together local data, current research and the child's voice to gain perspective on what life is like for children living in Shellharbour (CfC, 2019). The report was presented in a way that encouraged readers to empathise with children through the inclusion of the Child's Voice.

Bronfenbrenner's Social Ecological Theory (Kearns, 2017) was used to frame the collection of information and reporting of the findings. Applying this framework placed the child at the centre of the research, recognising that child learning and development is influenced by multiple factors. The importance of providing children with a positive home, learning and wider community environment was recognised, and informed the report domains: My Community, My Wellbeing, My Family, My Learning, and My Home, representing five key influences on each child's learning and development (CfC, 2019).

The State of Shellharbour's Children Report 2019 encouraged readers to understand:

- What life is like for children living in Shellharbour

- What is important to children

- What experiences are impacting children today

The collation of data from various sources (AEDC 2018, local data, consultation, research and the child's voice) identified multiple risk factors, as well as protective factors that impact the Shellharbour community. The key findings of the community consultation process that contributed to the report have been summarised in Table 1 Summary of Consultation. State of Shellharbour's Children Report 2019 (CfC, 2019).

Areas for further exploration were also identified in the report, and included child protection, homelessness, rates of children entering the out of home care system, and unreported incidents of domestic violence.

Domain	Summary of Risk Factors	Summary of Protective Factors
My Community	Economic disadvantage Sense of Safety Family and Domestic Violence Sexual assault Program – changing and long wait lists Poverty Intergenerational unemployment Lack of knowledge of available services	Community programs and events Employment opportunities Partnerships and engagement of Community Transport/access Quality Education and Care Understanding culture Agency initiatives Holistic approach
My Health / Wellbeing	Low birth weight; Smoking during pregnancy Disability Poor mental health Family and Domestic Violence and trauma Low aspirations Long wait list to access services Housing instability School readiness	Knowledge and access to support Sense of belonging Access to education Trust in community Resilience Safety in home and school Projects - building a team around the family Consistency and stability
My Family	Unemployment Mental health Family breakdown Family and Domestic Violence Sexual / indecent assault Prenatal care Intergenerational disadvantage Social isolation Safety	Attachment Support networks Education and skill level Feeling loved Consistency and stability Safety from violence and complex trauma Relationships Spaces and places
My Learning	Learning vulnerability and instability Education, school readiness and engagement Access to knowledge Transport Trauma Poverty/hunger Low aspiration Undiagnosed health issues, waiting times	Access to education, resources and information Allied health and early intervention Trauma informed practice in schools Play-based learning K-6 Cultural connections and Community hubs Transition to school support Respecting the voices of children Attachment
My Home	Housing stress, social housing, instability Socio-economic disadvantage Family and Domestic Violence Sexual / indecent assault Addiction-drugs; Alcohol; Smoking; Gambling Safety Poverty and food insecurity Mental health Family breakdown	Education and advocacy Knowledge and access to support Trauma informed practice and Child Protection Attachment; relationships Housing stability Family support worker Consistency Aspiration

Table 1. Summary of Consultation. State of Shellharbour's Children Report, 2019 (CfC, 2019).

Barnardos Practice Framework and Principles

Barnardos Practice Framework (2021) outlines the organisation's approach to achieving the intended outcomes for children, young people and their families. This framework creates a shared approach that collectively brings the vision, purpose and values of the organisation to life.

Practice Principles within the framework guide practice when working with children, young people and families. The seven Practice Principles are:

(Barnardos, 2021).

The Community Consultation process, the intention of which is to gather widespread perspectives from community, provides a lens of placing children and young people at the centre of our work in community. This is in accordance with Practice Principle 1 - Be child-focused. 'We listen to and advocate for the interests, wishes and views of children and young people' (Barnardos, 2021, p12).

By embedding the Practice Principles in the community consultation, an approach will be adopted across CfC Shellharbour's practices that align with the values and principles of Barnardos. The key principles provide a relevant, contextual and current framework to guide practice and service delivery, imperative in the work of CfC Shellharbour. The Practice Principles will connect with, and inform the Discussion and Recommendations in this report. Importantly, these will guide and be the focus of future programs and practices.

The Nest: A Framework to Support Children's Wellbeing (ARACY)

The Nest is ARACY's wellbeing framework for children and young people aged 0 to 24years. It is a holistic approach to children's wellbeing in the context of their daily lives. The framework adopts a connection of the different elements that a child or young person needs to thrive, conceptualising wellbeing as six interconnected domains that support each other to help children reach their potential. The six domains of The Nest are: valued, loved and safe; material basics; healthy; learning; participating; positive sense of identity and culture (Goodhue et. al., 2021). For optimal wellbeing, a child or young person needs to be adequately resourced in all six domains.

The Common Approach has been developed as a 'practical way to improve the wellbeing of children, young people and families'. The elements of this approach framed by the six domains of The Nest are illustrated in Figure 2.

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Figure 2. The Common Approach.

Bronfenbrenner's Social Ecological Theory

Like the State of Shellharbour's Children Report 2019 (CfC, 2019) Bronfenbrenner's (1977) Social Ecological Theory provided a framework for the consultation process. This model suggests that there are multiple social and cultural aspects that influence the developing child, including the child's characteristics, the immediate environment (such as the family and peers), and participation and interactions in the wider contexts (such as ECEC, school and the community) (Feriver et al., 2020) (Fig. 3). Consultation included children and young people and representatives from each context. Provocations primarily focused on the health and wellbeing of children and young people in the context of community.
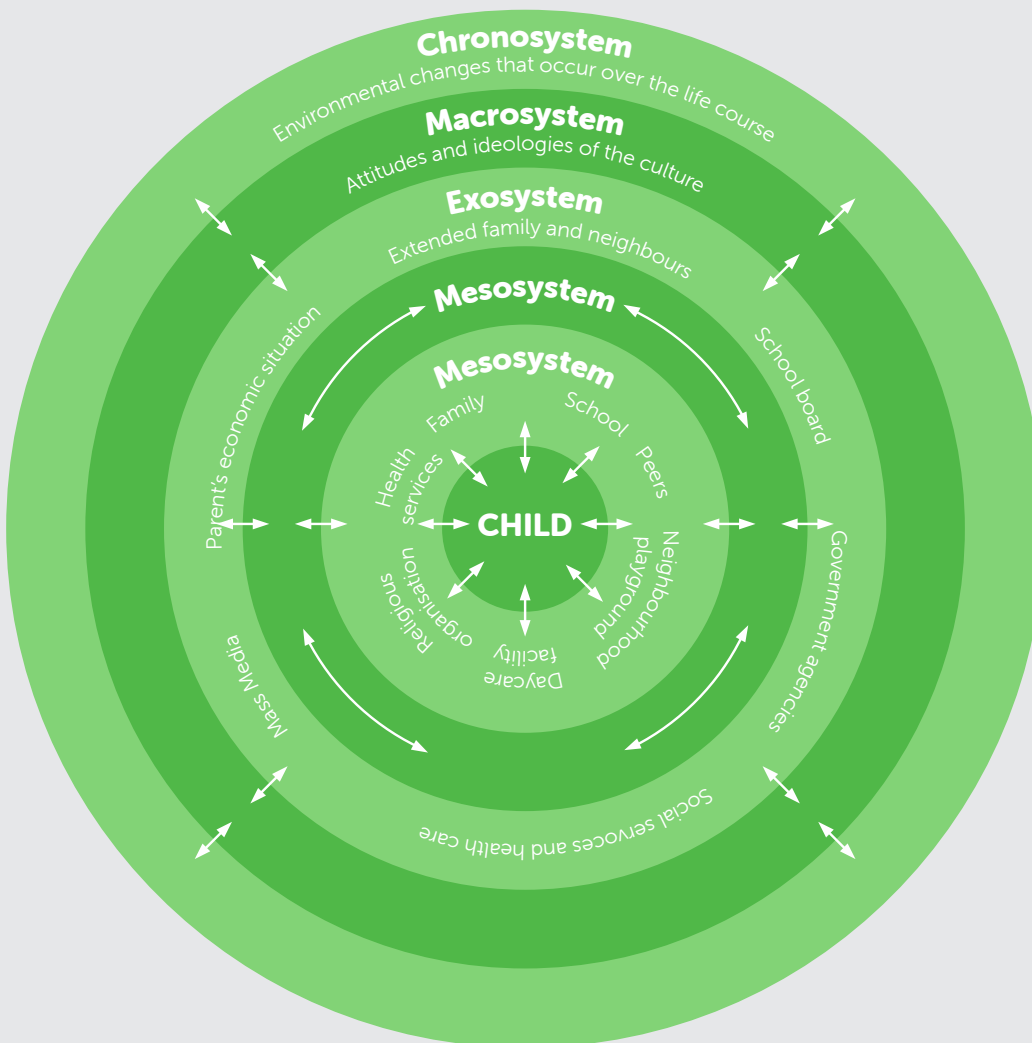
Figure 3. Social Ecological Theory.

Evidence-based Programs

'Evidence-based programs' are programs that have been identified as having a sound evidence base, and approved for use by Communities for Children Community Partners. It is a requirement that at least 50% of programs offered by Communities for Children Facilitating Partners are evidence-based programs (Australian Institute of Family Studies, 2021). Within Communities for Children Shellharbour, examples of evidence-based programs facilitated are:

Abecedarian Approach Australia (3a)
The program is a combination of teaching and learning strategies for use in early childhood settings and parenting programs designed to enhance children's cognitive, emotional and communication outcomes and readiness for school. Delivered to: Infants (0-2years) Early childhood (3-5years) At-risk or vulnerable .

Circle of Security (CoS)
Parent/child psychotherapy designed to assist parents to provide their children with the emotional support needed to develop secure attachment, resilience and enhanced school readiness. Delivered to: Infants (0-2years) Early childhood (3-5years) Middle childhood (6-12years) Parents at-risk or vulnerable.

DRUMBEAT (Discovering Relationships Using Music, Beliefs, Emotions, Attitudes and Thoughts)
A music program focusing on exploring healthy, supportive relationships, emphasising teamwork and cooperation. Delivered to: Early childhood (3-5years) Middle childhood (6-12years) Parents At-risk or vulnerable.

Sing and Grow
The program provides a learning and therapeutic opportunity for families through structured music-based activities which aim to support positive family relationships and build effective parenting skills. Delivered to: Infants (0-2years) Early childhood (3-5years) Parents At-risk or vulnerable.

Full evidence-based program profiles are available at: https://apps.aifs.gov.au/cfca/guidebook/

Community Consultation

Special Note

During the consultation period, restrictions imposed by the COVID-19 pandemic resulted in the consultation being facilitated predominantly online. Consultants acknowledge that this may not have been culturally ideal, however a considered and flexible approach was adopted to ensure participants felt safe and supported in the discussions. Respected community members provided advice and guidance on the most appropriate ways to connect with community and processes that were to be facilitated.

To ensure consultation was appropriate and accessible for participants, consultants engaged with community members during community group meetings, such as the IACBWG (Illawarra Aboriginal Community Based Working Group) and Ed U Play Tweens group. This minimised any additional expectations for these groups to meet.

Ethical Considerations

The design and facilitation of the consultation considered the best interests of groups within the community as well as individual participants to ensure an ethical and culturally sensitive process occurred. Seeking advice from Aboriginal Elders, program leaders, respected community members, and children and family services was integral to this.

Consultation

It was important that the community consultation was widespread and involved representatives from all groups within the Shellharbour area. This included, yet was not limited to, representatives from a range of ages, cultures, geographical locations, socio-economic status, employment status and involvement in community. A focus was on areas of disadvantage and vulnerability.

"We listen to and advocate for the interests, wishes and views of children and young people"
(Barnardos Practice Principle - Be Child Focused, 2021).

Participants were invited to participate in the Individual Consultation, Focus Groups and/or Surveys. Participants were identified through the CfC Consultative Committee, CfC Community Partners, local networks and via community connections. Contact was made with potential participants via email, phone contact, and at scheduled meetings.

The consultation process included overlapping stages of Individual and Focus Group consultation, as well as Surveys (Table 2). This design allowed information gathered in the Individual Consultations to inform the design of the latter methods of data collection - Focus Groups and Surveys. Initial Individual Consultation analysis afforded key ideas to be extended in the Focus Group discussions.

	May	Jun	Jul	Aug	Sept	Oct
Individual Consultation	▓	▓	▓	▓	▓	
Focus Group Consultation					▓	▓
Surveys					▓	▓

Table 2. Stages of Consultation.

Data Analysis

Braun and Clarke's (2013) seven stages of thematic analysis was used to classify, analyse, and account for meaningful data from the consultations. These stages included: (a) transcription; (b) familiarisation with the data; (c) coding; (d) searching for themes; (e) reviewing themes; (f) defining and naming themes; and (g) writing.

A process of cross-checking was implemented, with consultants independently reviewing transcripts and identifying and coding themes. These thematic analyses were merged prior to the identification of overarching key themes and sub-themes. This systematic process provided reliability and validity in the findings (Arthur, 2012). As the consultants were active participants in the Individual and Focus Group discussions, this also provided an in-depth understanding of themes.

Individual Consultation

Design and Participants

The Individual Consultations were designed to gather specific information from community members and allowed for an investigation into specific aspects of the community. The discussions were purposeful, yet informal, which enabled a deeper understanding of each person's role in community and their ideas. These Individual Consultations were conducted primarily as a 'conversation', and consultants sought a flexible approach to gain an understanding of community strengths, issues, priorities and opportunities. Conversations were positioned with a strengths-based lens and a framework of protective and risk factors. Each Individual Consultation was around 45-60minutes, and notes were taken.

These discussions were initially established as face to face conversations, however due to restrictions imposed by COVID-19, the majority were completed online via Microsoft Teams. Most of the Individual Consultations were with individuals, and some were conducted with a small group (i.e. groups of up to 6 participants from the same program). It is important to note that in some cases, participants may have engaged in more than one individual consultation due to the extent of their work in the community.

A total of 47 Individual Consultations were facilitated, and participants represented a range of target areas within community, some across multiple target areas

(Table 3 and Fig.4). (Refer to Appendix 6 for a full list of Individual Consultation participants).

Key Target Area	# Participants
Health	8
Playgroup	5
Aboriginal Community	6
Education	5
Community	7
Disability	4
Community Partners	8
Government	5
Parent / Family Support	9
Consultative Committee	1
Neighbourhood Centre	4

Table 3. Key Target Areas Represented by Individual Consultations.

Note that some participants represented multiple key areas.

*Aboriginal Community included community members working in Aboriginal Programs and/or persons identifying as Aboriginal. This figure does not include the strong representation of Aboriginal Community Members at the IACBWG meeting (see section - Special Case Consultation with Identified Groups).

**Representative Group of Participants.
Individual Consultations**
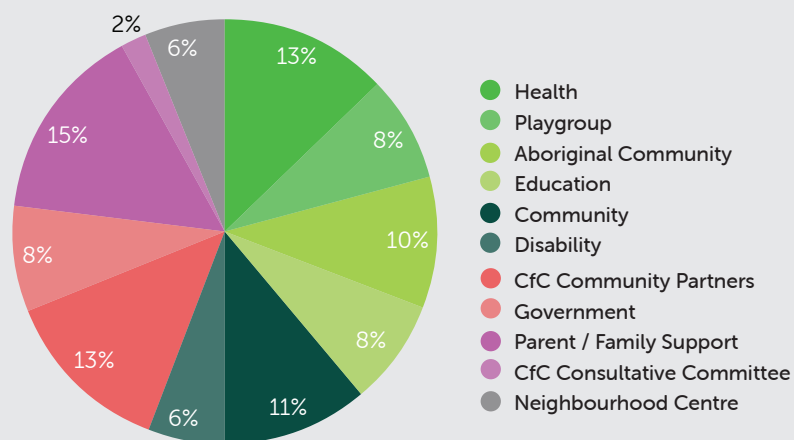
- Health
- Playgroup
- Aboriginal Community
- Education
- Community
- Disability
- CfC Community Partners
- Government
- Parent / Family Support
- CfC Consultative Committee
- Neighbourhood Centre

Note that some participants represented multiple key areas.

*Aboriginal Community included community members working in Aboriginal Programs and/or persons identifying as Aboriginal. This figure does not include the strong representation of Aboriginal Community Members at the IACBWG meeting (see section - Special Case Consultation with Identified Groups).

Figure 4. Representative Group of Participants. Individual Consultation.

A Summary of Findings

During the process of Individual Consultations, early analysis was completed that captured key ideas that had been shared. A word image (EdWordle, 2017) was created and provided an overview of the key themes from the initial 24 Individual Consultations. This overview represented the first half of the Individual Consultations (51%). The image (Fig. 5) was used to frame opening discussions in the Focus Groups (Refer to Appendix 3. Focus Group Presentation).

Figure 5. Initial Individual Consultation analysis.

At the completion of the Individual Consultation stage, another word image (EdWordle, 2017) was created, once again capturing key themes (Fig. 6).

Figure 6. Individual Consultation analysis.

Focus Groups

Design and Participants

Focus Groups were facilitated to gain collective views and promote a shared discussion that would enrich the community consultation (Arthur, 2012). The intention of the Focus Groups was to engage a representative sample from a diverse range of community groups and capture the voices of many. The Focus Groups allowed a collaborative discussion that was based on and complemented the Individual Consultations. Participants were invited to participate in the Focus Group based on their role in the community, however participation was open to all interested community members and the invitation shared amongst key networks.

Each Focus Group was facilitated online via Microsoft Teams, and the duration for each was approx. 90 minutes. The sessions were recorded and transcribed for analysis purposes. Participation in the Focus Group indicated consent for participant contribution to be recorded and presented in the Community Consultation Report.

Following participant introductions, the discussion was framed by a series of provocations that guided discussions. These included questions such as: **What are the strengths of our community? From a child/young person/family's perspective, what is important? What do you see as the main issues in the community that affect children and families? How do we ensure children and families feel safe and a sense of belonging? What additional programs and support may help? Discussion and reflection on the Draft Outcomes Framework for the Families and Children Activity (CfC Facilitating Partner Operational Guidelines, 2021) (Fig .7) and finally, what would you like to see future headlines be? (Refer to Appendix 3. Focus Group presentation).**

Figure 7. Draft Outcomes Framework for the Families and Children Activity.

Key Target Group	# Participants
ECEC (Early Childhood Education and Care)	15
Disability	11
Health 1*	6
Children and Young People	11
Health 2*	10
Schools	16
Child and Family	12
Aboriginal Community	6

Table 4. Key Target Groups in Focus Groups (Refer to Appendix 9 for a full list of Focus Group participants).

*Health was split in 2 groups (Health 1 and Health 2) as it was expected that it would be a large group. The allocation of participants into these groups was by random selection.

**note that some participants participated in multiple Focus Groups.

Representative Group of Participants. Focus Groups
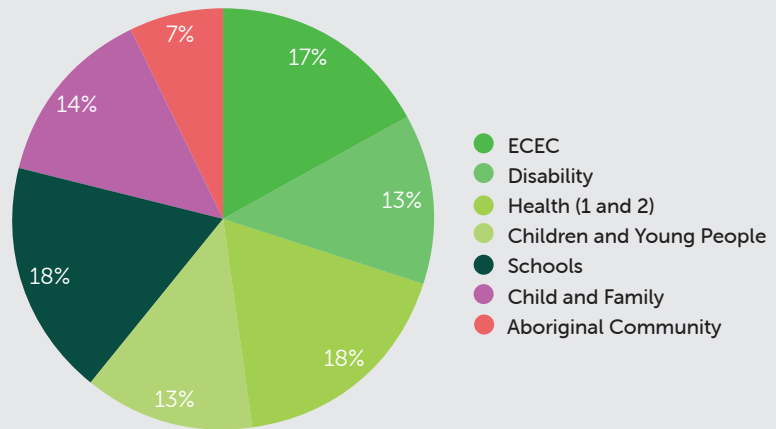
- ECEC
- Disability
- Health (1 and 2)
- Children and Young People
- Schools
- Child and Family
- Aboriginal Community

*this figure does not include the strong representation of Aboriginal Community Members at the IACBWG meeting (see section - Special Case Consultation with Identified Groups).

Figure 8. Representative Group of Participants. Focus Groups.

Focus Group 1. ECEC

This Focus Group was made up of community members that were closely aligned or directly involved in ECEC. Participants included ECEC service teachers and educators, Program Managers, Playgroup Managers and Facilitators, as well as representatives from Barnardos and Transition to School initiatives such as Schools as Communities. At the completion of this Focus Group a word image (EdWordle, 2017) was created, capturing key themes (Fig. 9).

(Refer to Appendix 9 for Focus Group participants).

Figure 9 Focus Group 1. ECEC. Focus Group Consultation themes.

Focus Group 2. Disability

This Focus Group was made up of community members who worked in disability services, and were involved with children, families and related programs. Participants included Supported Playgroup Facilitators, Program Managers, Department of Education, allied health and local business. At the completion of this Focus Group a word image (EdWordle, 2017) was created, capturing key themes (Fig. 10).

(Refer to Appendix 9 for Focus Group participants).

Figure 10 Focus Group 2. Disability. Focus Group Consultation themes.

Focus Group 3 and 5. Health

These Focus Groups were made up of community members that were involved in Community Health. Participants included representatives from NSW Health, SYFS, Barnardos, Healthy Cities Illawarra, Karitane and the Illawarra Aboriginal Medical Service.

At the completion of both Focus Groups a word image (EdWordle, 2017) was created, capturing key themes (Fig. 11).

(Refer to Appendix 9 for Focus Group participants).

Figure 11 Focus Group 3 and 5. Health.
Focus Group Consultation themes.

Focus Group 4. Children and Young People

This Focus Group was made up of community members that were involved in programs for children and young people. Participants included representatives from Beyond Empathy, Ed U Play, Shellharbour City Council and Neighbourhood and Community Centres.

At the completion of the Focus Groups a word image (EdWordle, 2017) was created, capturing key themes (Fig. 12).

(Refer to Appendix 9 for Focus Group participants).

Figure 12 Focus Group 4. Children and Young People.
Focus Group Consultation themes.

Focus Group 6. Schools

This Focus Group was made up of community members that were involved in education. Participants included representatives from local public schools, the Department of Education, UOW, SYFS, Allied Health Services and Ed U Play.

At the completion of both Focus Groups a word image (EdWordle, 2017) was created, capturing key themes (Fig. 13).

(Refer to Appendix 9 for Focus Group participants).

Figure 13 Focus Group 6. Schools.
Focus Group Consultation themes.

Focus Group 7. Child and Family

This Focus Group was made up of community members that were involved with supporting children and families. Participants included representatives from Shellharbour City Council, University of Wollongong (UOW), Karitane, Neighbourhood Centres, Family Services Australia (FSA), The Smith Family and Playgroup Queensland.

At the completion of the Focus Groups word image (EdWordle, 2017) was created, capturing key themes (Fig. 14).

(Refer to Appendix 9 for Focus Group participants).

Figure 14 Focus Group 7. Child and Family.
Focus Group Consultation themes.

Focus Group 8. Aboriginal Community

This Focus Group was made up of Elders and community members that had connections with the Aboriginal Community. Although many people were invited to this group, for various reasons they were unable to attend. To ensure this consultation with community was strong, consultants also joined an Illawarra Aboriginal Community Based Working Group (IACBWG) meeting to gather community member perspectives. At the completion of the Focus Group a word image (EdWordle, 2017) was created, capturing key themes (Fig. 15).

(Refer to Appendix 9 for Focus Group participants).

Figure 15 Focus Group 8. Aboriginal Community. Focus Group Consultation themes.

Special Case Consultation with Identified Groups

To ensure the community consultation process was widespread, captured a representative voice, and appropriate and responsive to the needs of participants, discussions also occurred during scheduled meeting and workshop times for some community groups. For example, consultation occurred during a CfC Consultative Committee meeting, CfC Community Partner meeting, Illawarra Aboriginal Community Based Working Group (IACBWG) workshop and during a weekly Ed U Play 'Girls Only' group for Tweens. This allowed participants to contribute to the consultation in a way that was time effective, age appropriate and whilst being in a safe and familiar space.

The Shellharbour CfC Consultative Committee

During the June 2021 CfC Consultative Committee meeting, an overview of the consultation process was presented, followed by brief discussions to initiate the consultation process (Refer to Appendix 2 for the presentation). Participants were invited to engage in small group discussions that focused on issues, priorities and opportunities.
A word image (EdWordle, 2017) was created from key information shared, capturing key themes (Fig. 16).

(Refer to Appendix 7 for member details).

Figure 16 CfC Consultative Committee. Consultation themes.

The Shellharbour CfC Community Partners

During the June 2021 CfC Community Partners meeting, an overview of the consultation process was presented, followed by brief discussions to initiate the consultation process (Refer to Appendix 2 for the presentation). Participants were invited to engage in small group discussions that focused on issues, priorities and opportunities

A word image (EdWordle, 2017) was created from key information shared, capturing key themes (Fig. 17).

(Refer to Appendix 8 for partner details).

Figure 17 CfC Community Partners. Consultation themes.

Illawarra Aboriginal Community Based Working Group (IACBWG)

During their October 2021 meeting, time was provided for an overview of the consultation process, as well as some brief discussions. After the discussion a word image (EdWordle, 2017) was created from key information shared, capturing key themes (Fig. 18).

Figure 18 IACBWG workshop. Consultation themes.

'Girls ONLY', Tweens group facilitated by Ed U Play

The members of this group participated in consultation over 2 consecutive weeks. The group consisted of 4-6 participants who live in the 2528 (postcode) area (Barrack Heights, Barrack Point, Lake Illawarra, Mount Warrigal, Warilla and Windang). Participants were asked what was important to them, where they liked to spend their time, and what made them feel safe (Fig. 19).

Figure 19 'Girls Only' group. Consultation themes.

Preschool-aged children

Educators in a local preschool spoke with the children during Child Protection Week and asked the question **"Where do you feel safe?"**. The children aged 3-5years drew pictures of the places and people who make them feel safe.

The following week the children were asked:
"Where do you like to play?" and **"What do you like to do on the weekend?".**

(Refer to Appendix 5 for ECEC Invitation to Participate).

Note: Answers to these questions may not be an accurate representation because the children were in lockdown due to COVID-19 and have been restricted in visiting places within their local community. However, we recognise the importance of hearing their voices and reflecting on the places they currently like to play. It would be interesting to ask the children these same question's when restrictions have lifted, and they've had ample time in the community to visit a variety of places and spaces once more.

Where do you like to play?

"I like going to the skatepark with my Dad" (NF; 5 years)

"I like to play on slides" (TC; 5 years)

"Baking cakes at home" (HC; 3 years)

"Go to the beach" (BN; 5 years)

"I like to come with Grandma for holidays" (AJ; 4 years)

"Go surfing at the beach" (OZ; 5 years)
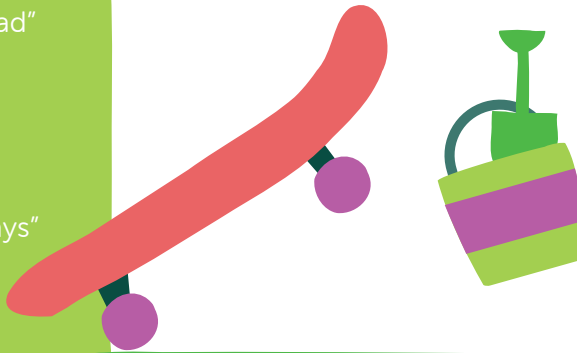
What do you like to do on the weekend?

"Playing with my toys with my Mum" (KD; 5 years)

"I like riding my scooter on the weekends" (HT; 4 years)

"Making icing and cake and cupcakes" (PB; 3 years)

"Going for a bushwalk with my Dad across the road" (NF; 5 years)

"Going to the park with my family" (AJ; 4 years)

Where do you feel safe?

"I feel safe at home" (KM; 5 years)

"I feel safe at home because that's where my Mum and Dad are" (OZ; 5 years)

"At home with Mummy" (HT; 4 years)

"At home with my Mummy and Daddy" (AJ; 4 years)

"Daddy" (H; 4 years)

"My Mummy and Daddy keep me safe" (PM; 3 years)

"At home with my family. My Mummy and Daddy keep me safe" (EM; 5 years)

"My Mum keeps me safe at home. Sara keeps me safe at Wallaroo"

"My Daddy"

"Daddy keeping me safe"

"My Dad"

m P . I'm drawing this picture to mu cause they keep me safe.

"Mum and Dad"
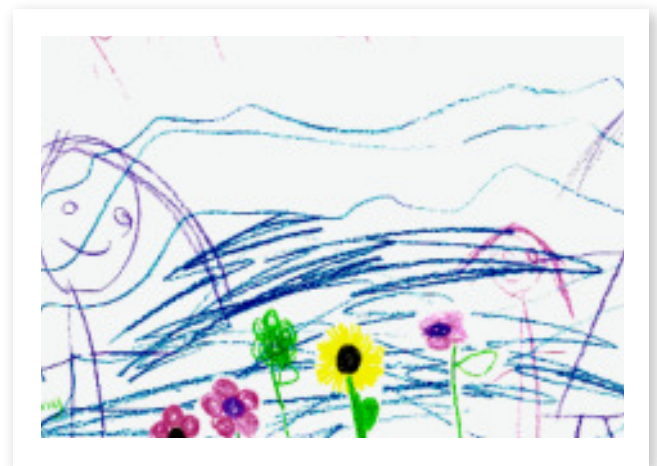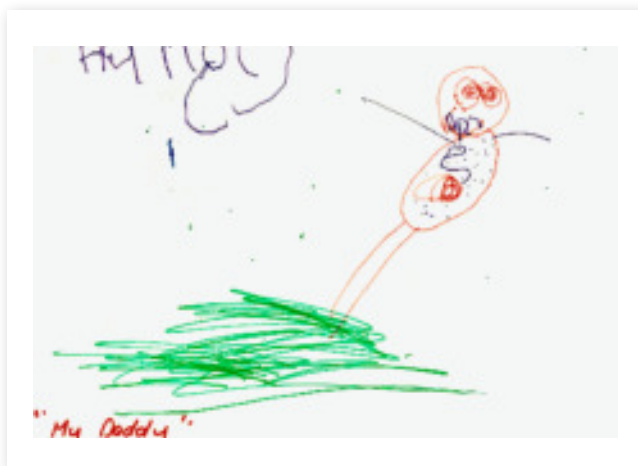
TAFE students – Consultation and Data Collection

Special mention needs to be made of the group of TAFE students studying CHC32015 Certificate III in Community Services (Shellharbour TAFE). The group of students (approx. 8-12 each week) volunteered time on a weekly basis over a period of 4 weeks to engage in conversation and support the consultation process.

Engaging with this group was important in the consultation process as it captured the voices of young people, parents and members of the community. The group shared their thoughts and ideas on the strengths, issues, priorities and opportunities in the area from their own perspective (Fig. 20). Engaging with this group also enabled a responsive and appropriate approach to engaging with community.
To fulfil TAFE practicum expectations, this group provided advice and support with the development and distribution of the Surveys.

Figure 20 TAFE students. Consultation themes.

Surveys

Surveys were used to collect information for the Community Consultation as they have the potential to collect large amounts of information in a short period of time, across multiple target groups (Kervin et al., 2015). As in-person community engagement was limited during the period of consultation (due to COVID-19 restrictions), surveys were an effective and appropriate way of collecting the voice of many community members at this time.

The surveys created were adapted from Community Consultation surveys developed by CfC Macarthur. A group of TAFE students (Certificate III in Community Services Shellharbour TAFE) assisted in the development of the surveys, and completed reliability and validity checks prior to community distribution. The engagement of the students was effective as each student is an active member of the Shellharbour community and together, they represented a diverse range of social and cultural contexts.

Three surveys were distributed to capture a broad range of voices from the Shellharbour community. This included Children (8-12years); Youth (13-18years); and Parents and Community. Each survey had a similar focus, based on early Individual Consultation analysis and were created via Survey Monkey. The survey questions and response options were appropriate for the target group. Survey links were distributed and shared via social media platforms such as Facebook and Twitter, as well as via email and in community forums and newsletters.

The surveys were open for a period of 4 weeks, and in total 101 responses (35 Children; 18 Youth; 48 Parents and Community) were collected (Fig. 21).

Community Consultation Survey Responses
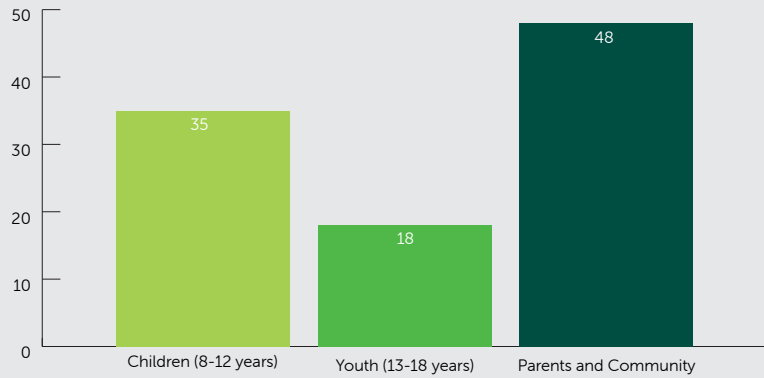
Figure 21. Community Consultation. Survey Responses.

Survey 1 – Children (8-12years)

(Refer to Appendix 4 – Surveys).
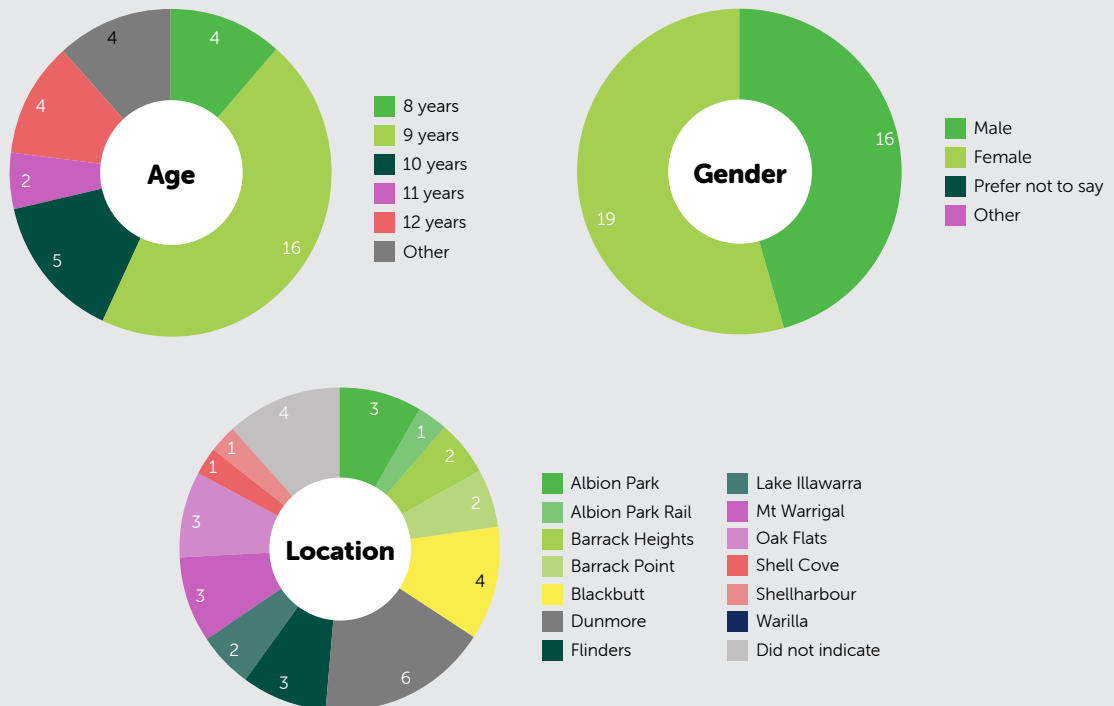
Figure 22. Participants (age, gender, location). Survey (Children 8-12years).
Note: Numbers are representative of participant responses.

A key finding for this age group was the importance of spending time in outdoor spaces – the beach, the lake and the parks. One participant noted that they loved the community events, such as 'Kidsfest'. Overwhelmingly, participants felt most safe while with their family (80%), and it was frequently noted that they really enjoyed spending time with friends. The majority (85%) of the participants engage with groups or programs. Concerns raised were the lack of things to do like 'youth areas' and 'kid friendly' activities, and participants suggested that they would like to have more facilities such as parks and accessible basketball courts as well as more Community Centres.

Survey 2 — Youth (13-18years)

(Refer to Appendix 4 – Surveys).

Age
- 13 years: 2
- 14 years
- 15 years
- 16 years: 3
- 17 years: 7
- 18 years: 5
- Other: 1

Gender
- Male: 5
- Female: 12
- Prefer not to say
- Other: 1

Location
- Albion Park: 9
- Albion Park Rail: 3
- Barrack Heights
- Barrack Point
- Blackbutt
- Dunmore: 1
- Flinders: 1
- Lake Illawarra
- Mt Warrigal
- Oak Flats
- Shell Cove
- Shellharbour: 1
- Warilla: 3

Figure 23. Participants (age, gender, location). Survey (Youth 13-18years).
Note: Numbers are representative of participant responses.

Participants commented on the 'lifestyle' that is afforded in the Shellharbour area – the beach, bushwalks, shops, schools and the 'good sense of community'. Most participants felt safe with family and friends. Nearly all participants (85%) enjoyed spending time with friends, however only half engaged in community programs or groups (45%). Many participants indicated that they would like more community spaces and facilities such as sporting facilities (basketball, tennis, skate park), one participant indicated the need for more creative spaces (such as for musicians), and two participants identified the need for 'safe' spaces to access for support, including mental health.

Survey 3 – Parents and Community

(Refer to Appendix 4 – Surveys).

Figure 24. Participants (age, gender, location). Survey (Parents and Community).
Note: Numbers are representative of participant responses.
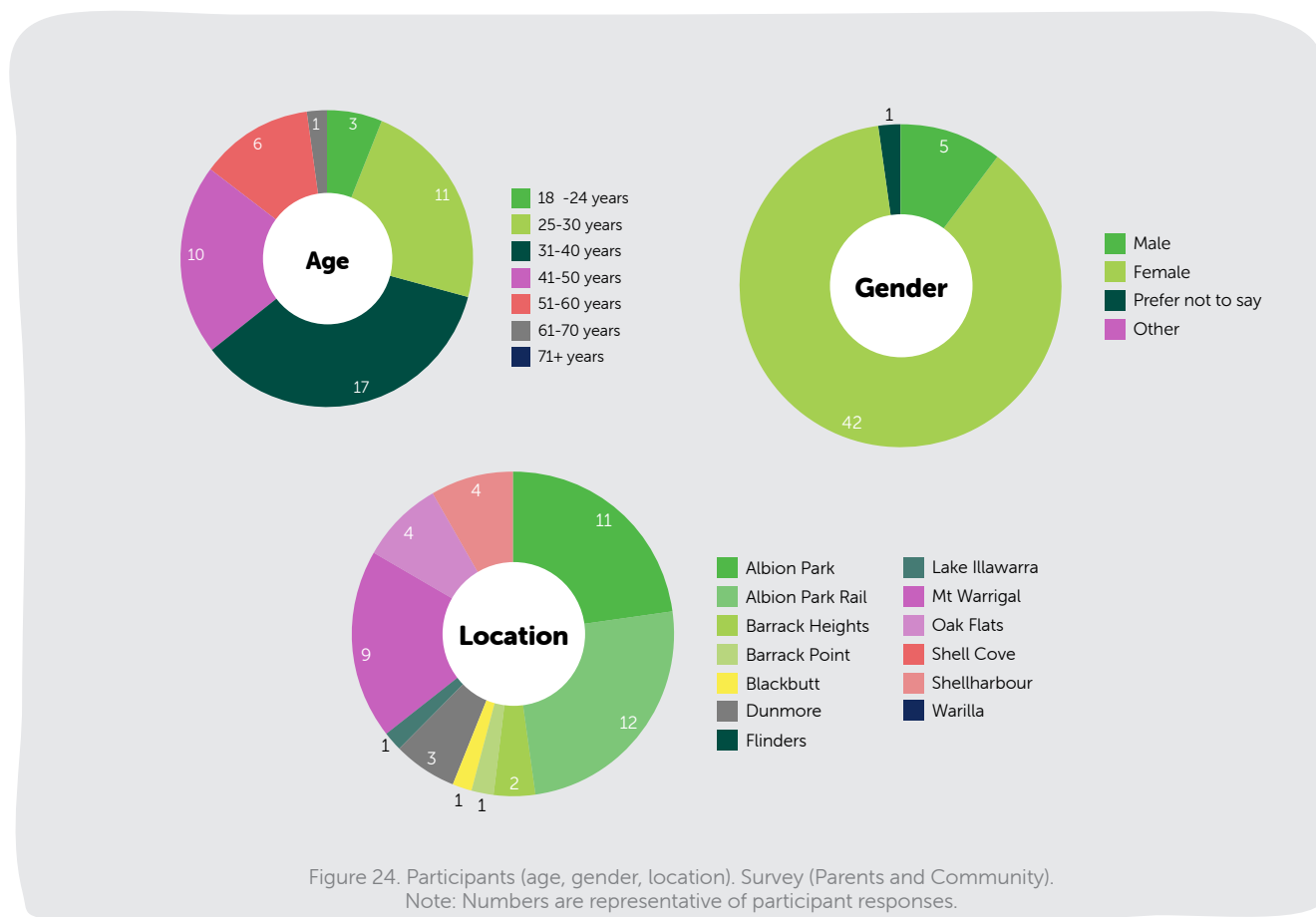
Consistent with the children and youth surveys, participants were most impressed with the natural environment and leisure activities that were available, including bike tracks and beaches. It was overwhelming that one of the main concerns in the community was mental health – the prevalence as well as the limited support. Nearly all participants (95%) indicated that mental health was the main issue in the community, and the majority of participants (78%) would like to see more mental health programs available. Only 65% of participants felt confident that they could or knew how to access services (health, support, education etc) if needed. A third of participants (and their families) attend a group or program, and 85% of participants would like to see more affordable programs offered. Many participants indicated that they would like to see more family activities, and especially for children 15years and younger. Participants were also concerned about the rate of growth and development in the area, and the impact that it had on traffic and access to services.

Key Trends Identified in the Surveys (Children, Youth, and Parents and Community)

- Appreciation of the environment – the beaches, parks, and greenspace.
- Enjoyed community events
- A feeling of safety and security around family and friends
- A decline in engagement in groups and programs across age groups from 85% (8-12years age group) to 45% (13-18years age group) to 35% (Parents and Community).
- Concern for the prevalence of mental health issues, alongside the limited knowledge of, and access to support.
- More activities and programs needed for children aged 8-15years.
- The need for accessible spaces for connection and recreation.

Case Studies

Based on information gathered during the consultation process – Individual, Focus Group and Surveys, it was evident that there were programs and initiatives that were exemplar models of practice. Providing an overview of these contributes to a deeper understanding of aspects of service and program delivery that capture the essence of the community. These case studies provide a rich and realistic picture of community engagement that is responsive and reflective.

Consultants would like to note that these are only a sample of programs that are available, and acknowledge that there are other successful programs that also support children and young people in Shellharbour.

Indigenous Network Program. Southern Youth and Family Services (SYFS) CfC Community Partner

Excerpt take from: SYFS. (2021). Indigenous Network Program. Program Logic, Theoretical Background and Evaluation for Assessment as a Promising Program. SYFS. Wollongong, Australia.

Permission granted from Narelle Clay AM, CEO (SYFS) to include this program as a Case Study.

Program Aim: The Indigenous Network Program aims to support Aboriginal Year 7 students transitioning from primary school to high school and Year 8 students to stay engaged in high school. Towards this aim, the Program supports students to develop their sense of identity, confidence and self-esteem through improved cultural connection and improved social and living skills.

Description of the Program: The Program targets students at the most disadvantaged high schools in Shellharbour where Indigenous students' attendance levels have been identified as below the national benchmarks. This presents the need for additional support for Aboriginal students who are at-risk of disengaging from these high schools.

The Program provides the participating students with individual case management, a range of cultural programs and age specific activities and workshops that assist with increasing school engagement, cultural connection and the development of social and living skills. The Program activities are designed to assist students to transition to and maintain engagement in high school.

The Program includes group work, case work and family liaison. It is generally delivered weekly for a six-month period over two school terms with the intake prior to term one and term three. The Program can accommodate between ten to fifteen young people at the one time.

Program Outcomes:

Short Term Outcomes
Emerging connection with their School; Improved school attendance; Increased engagement in class; Positive sense of identity and self-esteem through cultural connection, achieved through; engagement in cultural activities; knowledge of and/or engagement with Aboriginal Elders; knowledge of/or working to identify their Mob/Totem; Increased confidence through improved living and social skills.

Medium Term Outcomes
Continue to attend school regularly with reduced need for individual support; Ongoing and increasing engagement in class and school; Pride in their identity as Aboriginal young people (resulting increased confidence to engage in schooling); Established positive peer relationships at school; Increased confidence with social and living skills that support continued school attendance.

Long Term Outcomes
Complete High School (year 12); Be engaged in or have achieved further education or training; Anticipated community outcomes that could be achieved over time; All at-risk Aboriginal students attending these schools are supported to acknowledge and embrace their culture; At-risk Aboriginal students in participating schools are supported onto further education or employment;

Program Staffing: One of the key successes of the Program is the right staff to deliver the key activities in the Program. An important Program resource is the knowledge and skills provided by an experienced Aboriginal Youth Worker and another suitable Youth Worker. The Cultural Activities are delivered by Aboriginal staff and Local Elders.

Other suitable qualified and experienced SYFS Staff provide case management, general administration and support during the Program. This includes ensuring resources etc. are available to deliver this. SYFS also contribute funding to this Program.

Evaluation of the Program (2021): The analysis of survey data has shown, that those participants who have completed the Program, that there was improvement in all areas and a positive effect in terms of short-term outcomes. The success to the Program has been providing the participating students with a range of cultural programs and age specific activities and workshops delivered by experienced and recognised Aboriginal people in the Community. Support and engagement with Local Elders and individual case management have further added to the success and assisted with increasing school engagement, cultural connection and the development of social and living skills.

Volunteer Family Connect Program (VFC)

Karitane®
Leaders in parenting services since 1923

Overview provided by Sharlene Vlahos.
Director of Education and Business Development.
Adjunct Fellow Western Sydney University- Masters of Child and
Family Health Karitane

Volunteer Family Connect (VFC) is an Australian evidence-based home-visiting program that mobilises trained volunteers to provide support for parents of young children who are feeling isolated and/or overwhelmed by their parenting role. The program was developed in 2012 by an alliance between Karitane, The Benevolent Society, Save the Children and Western Sydney University, and is delivered in specific regions across Australia's eastern seaboard. The program has proven benefits for parents and volunteers demonstrated through randomised control trial (Grace et al. 2019; Grace et al. 2018), and delivers tangible, measurable benefits to the communities in which it is offered.

Effective early parenting support can lead to positive parent-child interactions and relationships and have significant long-term benefits for children, such as improved health, education attainment, personal relationships and other social benefits. These interventions are relatively cost effective compared to more intensive or tertiary interventions – indeed, VFC has been shown to have Return on Investment (ROI) of up to $5.42 for the most vulnerable families, with returns primarily in avoided future service usage. Data collected by the VFC joint alliance found that only 7% of parents and carers seek help, but 30% of all parents and carers need support.

VFC is for families of young children (0-5years) who experience geographic or social isolation, who report a lack of confidence in their knowledge or parenting skills, or who experience barriers to accessing mainstream services. It is a preventative program intended for families who do not yet require intensive service intervention. Under VFC, a team of local volunteers will be trained (30+ hours) and matched with families. Volunteers establish an ongoing, beneficial relationship with participating parents and their children, typically visiting two hours each week for up to a year. The visits help parents build confidence and social connectedness in their community. Volunteers are screened and receive ongoing supervision. The program targets vulnerable parents with young children who are experiencing social isolation, economic disadvantage, mental health issues or any of a range of challenges that would be alleviated through their participation in the VFC Program.

Necessity Kids: Community Connections

Overview provided by Jennifer Hill
Necessity Kids
Senior Speech Pathologist
Clinical Director

Necessity Kids is a multi-disciplinary allied health clinic which opened January 2021 in Dapto. Our mission was to bring allied health paediatric services to the Illawarra in both traditional and ground-breaking models of service. As the clinical director of Necessity Kids and the senior speech pathologist I was passionate about up-skilling the knowledge of teachers so they could confidently help to remediate speech and language issues in the classroom which would have a flow on effect for generations of children.

A recent Australian Parliamentary study reports that 13% of children in primary schools have either a speech disorder or language disorder which directly effects the child's ability to understand, learn and read. (Source: https://www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/Speech_Pathology/Report/c03)

This means that many children in the Illawarra are unable to learn effectively as their teachers are not trained to identify the issues they are having or how to address them. Mount Terry Public School's Executive staff, headed by David O'Connor and Darrell Wallace, identified this issue compounding learning difficulties in their classrooms but were unable to access the speech pathology services to help them tackle this problem.

The Illawarra has a lack of allied health services with very limited free programs and private clinics with extensive waiting times. Families who may be able to identify that their child has additional learning needs at 3 or 4years of age may be stuck on long waiting lists to access services which results in children entering school not ready or able to learn. Mount Terry Public school saw need across the allied health domains of speech pathology, occupational therapy, family support (counselling) and exercise physiology.

Necessity Kids and Mount Terry Public school joined forces mid-2021 to trial allied health services in the school. This meant employing staff from Necessity Kids to be immersed in the Mount Terry Public School programs. The program began by identifying children with speech disorders in the K-2years and working towards helping these children to speak clearly. The main reasoning behind this is in the principal of the speech to literacy link. Children are not ready to learn about sounds for spelling and reading until the can say these sounds clearly. There is also much evidence about the social impact of not being able to speak clearly. Future goals will include receptive and expressive language and team teaching in early years classrooms in the area of phonological awareness and speech sounds.

Unfortunately, COVID-19 did cause us to think laterally which meant we delivered some sessions via zoom to students learning at home, but as we start to return to school this week the teachers are amazed at the impact that the allied health team has had.

We look forward to a ground-breaking allied health/ educational model in 2022 and we are excited to work with the teachers and families to help the children of the Illawarra be the best they can be.

Overview provided by Nicole Riley
Principal. Warilla North Public School

As a school we developed a genuine, professional and personal commitment to empowering Aboriginal children through education using programs that are relevant, challenging and reflective of Aboriginal culture and heritage. We have created a culture where all staff practice inclusion and value the diversity of people. Aboriginal culture is embedded in wellbeing and curriculum at Warilla North Public School.

In partnership with the University of Wollongong, Delivery Support and Warilla North staff, students and community created Cultural Connections, a program designed to use local Dreaming stories to share local culture and knowledge with the whole community and to give teachers the confidence to embed Aboriginal perspective into all that they do.

Outcome: Tell Them from Me (TTFM) survey data identified that in 2018, 50% of Aboriginal students strongly agreed that they felt good about their culture when at school. After implementation of the program 83% strongly agreed. The same survey showed that only 14% of students strongly agreed that teachers had a good understanding of their culture in 2018 compared with 91% in 2021, demonstrating the professional learning for teachers and activities for students had a high impact on our Aboriginal students and their self-efficacy.

The NSW Government is committed to supporting the learning and wellbeing of every student in NSW public schools. Behaviour support is critical to promoting engaging and effective classrooms and lifting student performance. Many students at Warilla North Public School present with behaviours that may contrast with their internal psychological state.

We have empowered staff, parents and community to deliver a tailor-made management plan, through consultation with expert personnel and outside agencies to suit each child's need. Trauma Informed Practice in education is what happens when we put student wellbeing at the core of everything.

We have a clear statement of expectations which has brought a change in mindset from all stakeholders, teachers now ask themselves why a behaviour might be occurring, and provide a fair consistent, predictable approach to the management of wellbeing.

Outcome: A whole school approach, which is underpinned by practice, support, ongoing improvement and systems reform. All students feel safe at school, they know that they can approach any classroom teacher, principal, SLSO or office staff, and receive the same response. As a school we support children in building the self-regulation skills that are a challenge for them and include them in the whole process.

As a community we have successfully led the transformation of Warilla North Public School, from underwhelming performance to becoming a school of excellence by being clear, open and transparent on our expectations and providing an understanding of current research "neuroscience of the brain" and how it relates to attention span.

I encouraged experimentation and innovation, where teachers began adjusting teaching times to ten-minute sessions of explicit, quality teaching. I led the research of Finnish school structures working closely with Pasi Sahlberg and the Australian Childhood Foundation. This resulted in regular play-based brain breaks incorporated into learning. All classes are using Google Classroom for student assessment, parent and student feedback, and video tutorials for support. The process of change is ongoing and has occurred through establishing a clear focus on quality teaching in a team teaching/ open classroom setting.

Outcome: Improved student academic and social outcomes and minimised negative behaviours. The 2018 data shows 77 short suspensions and 11 long suspensions, 2021 data has 16 short suspensions and one long. Office referrals decreased from 73 in Semester 2, 2018 to ten for Semester 1, 2021. The use of data and innovative practice to shape classroom structures, programs and individualised learning has resulted in improved outcomes for all students. The Premier's Priorities agreed target for reading was lower bound 19.50% with actual achievement of 21.88%. In Numeracy lower bound target was 15.50% with actual achievement of 15.63% in 2021.

In our local community it was apparent that families required intervention from outside services to support their children as they were not gaining access to support due to lack of awareness of services available. Identifying capability deprivation across our community of schools I recognised key stakeholders and gained their support in providing a program to address the issue. We needed a dedicated and knowledgeable caseworker, employed across our community of schools for the specific purpose of collaborating with and providing support for families from early childhood through to adulthood.

Outcome: We created the ANCHOR project which runs across five schools, all stakeholders find this mutually beneficial with the project providing a co-ordinated well-being response for children, young people and their families with a view to provide education, stability and sustainable support for the family. This project is based on supporting Student Health and Mental Wellbeing through wrapping support of inner and outer agencies around a whole family.

Most importantly we have built trust between students, parents, community partners and the school. We are always open and honest and have the difficult conversations, but we have such a strong belief in our students that our high expectations support growth across the whole community.

Ready Steady Community Engagement Through Podcasts
CfC Community Partner

Beyond Empathy
Excerpt from https://www.be.org.au/podcasts

Ready Steady uses art to 'build heaps of more-better words' to improve life opportunities in disadvantaged places. Ready Steady is a project that collaborates with people of all ages in public housing areas of Shellharbour and Wollongong LGA to produce, record and perform stories. Ready Steady creates a social media resource hub for parents and community members to learn and interact with each other around creating those essential language development experiences for all children in our community. Ready Steady stories are assembled into a podcast series and presented at live community events. The Ready Steady podcast series also includes informational spots that highlight practical ways that parents and the whole community can interact with under 4year old's to improve relationships, connection and communication to improve their educational and life opportunities.

2528 Girls ONLY (G.O)
CfC Community Partner

Overview provided by Nikke Gladwin
Director, Ed U Play

Originally the 2528 Drop-In Project had been designed to cater for children up to Year 6 to have a safe, calm, predictable and positive space to go to after school. The Drop-In had familiar staff and activities, and great food! More importantly, the Drop-In project provides a soft entry, familiar space, a 'gateway' to the programs that are delivered by Ed U Play and other services that staff link children and families to for extra help or support.

Over the past year the Drop-In had grown in popularity, with nearly 50 children coming to the small space on a weekly basis. We were bursting at the seams. The acoustics of the building fed into the volume, the children's behaviour was escalated by the noise.

Emerging from COVID lockdowns it was evident that the pandemic and all its restrictions had an impact on the confidence of Year 6 students transitioning to High School, and in particular, girls. They didn't stop attending in their usual pattern (6months after moving to High School). With extra and older children staying; the usual younger cohort joining; and COVID restrictions on numbers, we needed to reduce the group size. Ideally, we just wanted to split the group into two age groups, but budget and availability of space wasn't to allow this. Staff approached the High School children to find out their thoughts on moving onto youth activities in the area.

The response was interesting. They were not ready to leave! They liked the Drop-In, the activities, the staff and the way it was delivered. They felt safe, they pleaded with the staff not to make them leave.

The feedback from the High School children led us to think more deeply about what they were saying, especially what they needed. It became evident that there were so many things happening on a social and emotional level for these girls. Ed U Play Director, Nikke Gladwin, began to investigate what experiences other services were having, where the gaps were and what could be done to support this.

It was the same story throughout the community. Our Year 6 – 8 girls needed something quite specific. It was an opportunity to work on transitioning to High School, body image, safety, friendships, and confidence. We knew what needed to be done. The girls had given us ideas for activities however NSW went into COVID lockdown once again. Such bad timing. We had given the 'Girls ONLY' Project some weight, gained support and then we had to stop.

Creatively the 1hour 'Girls ONLY' session went online. Weekly zoom sessions were arranged for the girls to attend. It provided a 'holding space'. We connected girls with other agencies, different activities for wellbeing, and mindful art activities. We have had 8 girls attending each week. Some of the girls from the Drop-In haven't managed to get over the barriers to participation, and these girls have received 'Hello' packs with little treats, worksheets and notes of support.

As we emerge from the restrictions, we are planning a 'Girls ONLY' meal out to celebrate our strength and achievements through lockdown. Our next step will be to reconnect with those we have missed, and with our community partners. **Together we will make a difference to these young women.**

Consultation Summary

All consultations (Individual, Small Group, Focus Groups and Surveys) were collated, and from this, key themes identified. Framed by elements of strengths, issues, priorities and opportunities, the main findings are presented below. These lists are not exhaustive, however capture the most prevalent ideas.

Community Strengths

Identified themes	Key ideas
Physical environment and facilities	Natural environment – parks, beaches Recreation – pools, bike tracks Library
Collaboration	Willingness to work together Partnerships between education and community Sharing knowledge Innovation and flexibility Holistic approach to child and family wellbeing
Advocacy	For children, young people, families and community Sense of responsibility
Key People	Women Educators Community leaders Expertise and commitment
The Community	Pride in the community Trust, empathy, commitment Diversity and culture Resilience
Connections	Community events Cultural connections

Table 5. Community Strengths.

The environment was a strong feature throughout all consultations – and particularly important for the children, young people and families as was identified in the Small Group Consultations and Surveys. An emphasis on the natural environment, such as the beach and greenspaces, as well as outdoor recreation facilities such as parks, skateparks and bike tracks were common.

"...we've got some great park areas, bike tracks for families, play areas at Windang, beautiful beaches, so there's lots of outdoor areas for families to come to" (FG7. Gillian Pilkington).

"Going for a bushwalk with my Dad across the road" (NF; 5 years)

"Go surfing at the beach" (OZ; 5 years)

"I like going to the skatepark with my Dad" (NF; 5 years).

"I like riding my scooter on the weekends" (HT; 4 years)

"Going to the park with my family" (AJ; 4 years)

The sense of community collaboration, authentic relationships and willingness to work together was convincing in the Focus Groups, and apparent throughout all consultation. These partnerships included connections between families, agencies, schools and health services. Attributes such as generosity, trust, empathy, advocacy, outreach and sharing expertise were common. A sense of community collegiality and shared knowledge was strong and was viewed to contribute to a holistic and responsive approach to the health and wellbeing of the community.

"You can't underestimate the trusting relationships that families do develop with early childhood educators" (FG1. Emma Rattenbury).

"...giving parents, families, kids different options, I think leaders of the school really understand the needs of their community, the needs of their kids and their families" (FG6. Kristen Cairncross).

"There's a genuine understanding of community and families, but also when families and communities change" (FG5. Sharlene Vlahos).

Consistent in the conversations was the importance of leaders and key people within the community. The value of educators, cultural leaders and women was identified often.

"Here in Shellharbour there's amazing leadership and there's amazing provisions being put in place for our families and our students" (FG6. Kristen Cairncross).

"It's women who drive this work, so I think women are the strength within the community as well" (FG7. Samantha Lukey).

There was a sense of pride in the community itself- the people, the culture, the diversity and the resilience. It was clear that it was these qualities and the strength of the people that provided a layer of protection during times of change and complexity. Furthermore, it was the community connections, such as the connection to community events (such as Education and Employment Expos), and the celebration of culture that were seen to unite the community and were highly regarded.

"… something unique about the community, and in these districts that is the strength of the people. That's the strength of the community as their connection to their land; to everything" (FG8. Nikita Tompkins).

"Such an amazing culture, which is, you know, a big thing. This same community, which is just amazing……you see in nearly every single community you know, having that culture celebrated, which is just amazing" (FG4. Elias Rees).

"…the diversity in our community and our Aboriginal culture and how it plays a huge part in determining what happens sometimes in our community" (FG7. Danna Nelse).

"Events are just …so valuable for community to connect that way and just recognise that there's so much support out there" (FG7. Suzi Francis).

Community Issues

Identified themes	Key ideas
Health and Wellbeing	Basic needs – Housing, food security Financial pressure Mental health Trauma Family and Domestic Violence Stress and burnout
Engagement	School engagement Parent engagement in programs Lack of trust
Isolation	Social disconnect Transport
Access to knowledge, services and support	Limited programs, support Waiting times Funding Access to information Transitions Knowledge of services
Goals and ambitions	Confidence and capacity Feeling empowered
Sense of belonging, identity and culture	Community perceptions and expectations Secure social situations Cultural disconnect Places to connect
Complexity and change	Consistency Complex family issues Change in society and community
Table 6. Community Issues.	

Participants identified what they had experienced or perceived were issues that impacted the whole of community – individuals, families and the community itself. The health and wellbeing of all people was of greatest concern and the issues identified were not exclusive to any particular group, however appeared to be most prevalent for people in disadvantaged areas or were most vulnerable. The most prevalent health concerns included meeting basic human needs (such as food security), alongside safety (physical and emotional), housing, the impact of trauma, domestic violence and mental health as well as the impact of stress and burnout particularly during complex times.

The prevalence of mental health issues, as well as the limited knowledge of, and access to support services was an overwhelming concern presented in the Youth, and Parents and Community Surveys. It must be acknowledged that Community Consultation occurred during the COVID-19 pandemic, and therefore at a time of unprecedented complexity, uncertainty and challenges. However, the community concern cannot be undervalued, and perhaps the complex time experienced may have resulted in pre-existing and underlying issues more visible.

Trauma was identified as an overarching health concern that many in the community experienced. Inter-generational trauma was a concern, and the need to break the 'cycle of trauma' and develop trauma-informed practices that support children's behaviours and self-regulation. This was also an area of focus in the State of Shellharbour's Children Report 2019 (CfC, 2019) and so continues to present as an influential factor in the health and wellbeing of children and young people, and an ongoing community issue.

Many participants were concerned with the increasing prevalence of family and domestic violence, and the impact that it had on many aspects of community – children, families, women and the capacity of services.

"These kids thrived in that program because they had somewhere to be. They weren't getting into any trouble. They were being fed so we knew exactly what they were eating. You know they were having dinner that night, so that was one thing that was checked off their list" (FG8. Nikita Tompkins).

"..unless you have those basic level of human needs, whether it's you know safety and clothing and food to eat, you're not going to be able to achieve anything else" (FG8. Nikita Tompkins).

"Not feeling like they have a home or even not feeling like their home where they live is safe" (FG8. Rebecca Simon).

"Not having that access to a home or not being a safe place that is home, underpins a lot of other issues young people are dealing with" (FG8. Rebecca Simon).

"We are seeing that there may be the effects on children and families from mental health, domestic violence, drug and alcohol use. But then the flow on is .... extensive waiting lists and that can become really challenging for families" (FG3. Jo Villa).

Many participants noted the poor engagement, or more concerningly the lack of engagement in programs, education and social situations. Most frequently discussed issues were school retention (especially for young Aboriginal children), and parent engagement in support programs. It was evident in the Surveys that there was a relationship between the age of the children and engagement in programs, i.e. there was a decline in engagement as the children got older. Limited or lack of engagement in these concerned participants as the impact on individuals – physically, socially and emotionally were clear. Poor, or no, engagement has an impact on a person's identity and sense of belonging, with the greatest impacts seen for young Aboriginal members of community and for young people who are moving through various periods of life transition. Potential reasons for poor engagement were proposed, some of which included a lack of trust, fear of not belonging, and a lack of cultural sensitivity or appropriateness of the learning environment.

Furthermore, participants also spoke of the sense of isolation and disconnect that was experienced by some in the community. Although this may relate to poor engagement, the direction of this relationship is unknown. Isolation due to families re-locating, services working independently of each other and transport issues were raised.

"School environments are the only place that sees a child every day and can connect, measure the changes and notice behaviours" (FG3. Ceiarn Graham).

"The hardest thing is ....you often get the people who already have the desire who already are motivated" (FG2. Jane Warren).

"...transport or getting there becomes an issue and so I think that is one of the things that I think being able to access the service when they need it" (FG3, Jo Villa).

"Young ones are struggling with their sense of identity and not knowing where their mob's from" (FG8. Rebecca Simons).

Community (mis)perception, level of understanding, and barriers to feeling a sense of belonging was a recurring theme. Several participants and groups identified this, however it was most prevalent in Focus Group 8 (Disability). It was agreed that for families who may be supporting a child with a disability, community perception was a significant barrier to acceptance and access of services due to families feeling that they would be judged.

"Community perception, I think is a huge issue for families. It's how other people perceive them.....there's always so much about how it's not just the disability that someone has. It's about how people perceive that disability (FG2. Jane Warren).

It is well known that we are living in complex and challenging times, with much uncertainty. Changing family structures, dependence on digital technology, lack of consistency in support and 'chaotic' lifestyles were frequently mentioned. Reference was also made to the impact of COVID-19, and undoubtedly the impact that this had on not just the health of people, but the social disconnect, instability, uncertainty and the widening of the disadvantage gap.

"...because of lockdown and everything going online, and it is the digital divide. It's a huge issue for disadvantaged families at the moment" (FG7. Suanne Sneddon).

Access to knowledge, services and support was another major concern for participants. Participants identified that services and programs may be available to the community, however it was clear that there were barriers to these. Barriers included gaps in the availability of services to specific age groups (such as young women and children 8-15years), and was frequently commented on in the Surveys. Other barriers suggested included extensive waiting lists; services not individualised or local; poor community perceptions (such as involvement in a Parenting Program indicates a deficit); and lack of knowledge of what may be available. The knowledge of services, as well as the ability to access these came through as one of the most important predictors of health and wellbeing in the TAFE students' consultation group.

"…. some of the challenges that we're seeing across the board. Now, for these young families in this space who you know haven't had the experience…. You know then they're new in this space as young families and they're struggling. They're not sure where to go, and so I think we'll start to see the impact of this" (FG2. Tarryn Bracken).

It was identified that the impact of multiple layers of community disconnect; limited access to services, knowledge and funding opportunities; and a high demand for services with extensive waiting lists has resulted in an effect on the health of families, parents and professionals. Of significance was the concern for a lack of early intervention due to the barriers imposed. A recurring barrier in Focus Group 2 (Disability) was not only the overall lack of funding, but the lack of funding in the areas of most need. This was discussed in more detail in the Individual Consultations, identifying funding for non-therapy based services like 1:1 support, group based support and respite needed an urgent review. Furthermore, it was evident throughout the consultation that due to the increasing demands, and barriers to receiving support when needed, parents and professionals are suffering from stress and burnout, and therefore their capacity to support their children and young people reduced.

"It comes back to funding….how do we get governments to understand that it is so important when a person reaches out, somebody needs to be there (FG4. Danna Nelse).

"It's great to facilitate connection, but people don't know about services in the first place. We can't facilitate that connection" (FG2. Julia Oreopoulos).

"If [children] don't have adults in their life who know how to access those services or support them to access services, they are not going to thrive" (FG3. Jo Villa).

"Often their connections between one service is another service. I mean, we, if you know something exists, you can then refer people to that, but I think sometimes we're all in our silos doing the best that we can, but I feel like if we had a more connected approach, there would be even better outcomes for children and families" (FG2. Jane Warren).

'It's around capacity and the young people's mental health and needs not being addressed, because the parents are so overwhelmed, exhausted; they have their own mental health needs that are not being addressed" (FG3. Johanne Sneddon).

"If we aren't supporting the adults, then we won't be able to support the children" (FG3. Jo Villa).

Community Priorities

Identified themes	Key ideas
Identity, community and culture	Authenticity Pride and ownership Respect Holistic approach
Belonging and safety	Safety – cultural, physical, social and emotional Trust Spaces and places Acceptance Meet basic needs
Education and employment	First 2000 days (Early childhood) Early intervention Education – whole of community Responsive models
Engagement	Community Family Education Culture
Responsive and reflective practices	Being where people are Holistic approach Individualised and local support and programs
Relationships and connections	Family connections Attachments Cultural partnerships
Community knowledge and capacity	Celebrate achievements Strengths-based approach Empowering people Rights of the child Cultural awareness Awareness of support, services and programs

Table 7. Community Priorities.

One of the most prevalent priority areas identified across all conversations was the need to develop and embrace a sense of identity, community and culture. This was seen to be most significant for Aboriginal people, as well as young people. Having a strong sense of identity and connection to culture was viewed as a predictor of engagement and success. Importance was placed on real life and authenticity, as well as developing a sense of purpose, pride and respect in one's own culture, as well as the shared culture of the community. Community responsibility and ownership was paramount to this, as well as having role models and mentors to guide and support.

"...they're part of something bigger than themselves" (FG6. Joanne Brassil).

"it is very important respecting who you are as a person. As an Aboriginal young kid or young person having respect where you come from" (FG8. Uncle Richard Davis).

"An Aboriginal-centred sense of wellbeing" (FG8. Rebecca Simon).

"Secure themselves in their tribe" (FG4. Bonnie Hittman).

"...build up their sense of identity and culture through education, mentoring, access to services" (FG8. Rebecca Simon).

"...build identity and understanding about how you fit in, as if you feel like you've got something to contribute, then you feel like you have a sense of purpose in why you're there" (FG8. Rebecca Simon).

"...if they know that they belong to a community, you know, to the local Aboriginal community, they feel proud" (FG8. Uncle Richard Davis).

Practices and relationships that supported the community and created a sense of belonging and safety were important. The ability to have basic needs met across all domains (physical, social, emotional, cultural) and creating a sense of belonging and safety for all community members was a key factor in many discussions. Participants felt strongly that creating places and spaces for connection, where members feel safe was a key priority.

"They need to be loved.....they need to be safe...... they need to be listened to and believed... and they need reliable people around them they trust and support" (FG4. Jenny Rowland).

"If you've got somewhere safe to live that you can actually afford, then other things fall into place" (FG3. Ceiarn Graham).

"They just want places where they can hang out with their friends" (FG7. Danna Nelse).

"Focus is starting on the whole child...... looking at mental wellbeing, early childhood development, transition, physical wellbeing" (FG6. Darrell Wallace).

Education and employment were seen as foundational to the health and wellbeing of the community. Education was undeniably viewed as a powerful tool for life-long success and engagement. Opportunities for education from birth and thereafter, as well as early intervention were key to many of the discussions, and whole of community education most important. Participants also spoke of the processes of education that afford connections with role models and mentors and has the potential to offer a sense of achievement, belonging and self-worth. Education builds capacity, which in turn becomes empowering for people.

"Education. ... It's a powerful tool that gives you knowledge. Understanding what you want to be, where you want to be" (FG8. Uncle Richard Davis).

"....the families feeling like this is a safe place for us to come. This is where we belong and we actually use that language at our school. You belong here. This is where you need to be" (FG6. Nicole Riley).

It was apparent in all conversations that although there may be opportunities available for education and programs that support health and wellbeing, it is the engagement in these that will be most important. It is the commitment and creating environments where people want to engage that is significant. Without commitment and consistency, participants were concerned that the benefits of the opportunities would not be as far-reaching, and the impact may lead to other issues.

"...get through to the end of high school to make that better transition into further education and employment" (FG6. Stephen Dodd).

Responsive and reflective programs that are culturally responsive, innovative, sustainable and specific to the community were seen as critical in engagement and positive outcomes. Participants agreed that as access was at times restricted, and knowledge of programs poor, it was important that programs were developed 'where the people are'. Participants spoke of programs that took place in community spaces as well as the importance of community spaces such as Neighbourhood Centres that create a sense of belonging and ownership of the space. It is within these spaces that participants noted that additional services, such as health, parenting support and early education were most successful.

Taking a holistic and responsive approach to community engagement, education and outreach was important. It was identified in the discussions that it is important for young Aboriginal children and young people to learn on Country, the most appropriate way for culturally authentic learning to occur.

"...(there are) many forms of education....understanding, cultural, belonging... it's all education' (FG8. Uncle Richard Davis).

"Allow young people to learn in different ways" (FG6. Stephen Dodd).

"...we need to think a bit differently. We have to be very family focused. [Considering] what's best for the family, not what's best for the service. It doesn't work for all families, but providing the opportunity for them to choose. And it's not just a one size fits all, and so I think we have to be really adaptable and work with families about what works better" (FG7. Sharlene Vlahos).

"...if you share the knowledge of therapy or development it is actually going to be more sustainable for those schools and early learning centres.... If you get the teachers and the parents building that capacity and knowledge, there's more sustainability for that inclusion support" (FG2. Blake Stewart).

The role of relationships and community connections was a priority area. In particular, the role of the family and family connections was identified in all conversations, and it was central to the wellbeing of children and young people. Developing strong family and community attachments provides a rich and meaningful opportunity to develop a sense of identity, trust, cultural awareness and a strong sense of belonging. Many participants identified the need for holistic service models that support the whole family, and this is where the best outcomes may occur.

The feeling of safety, belonging and support from family and friends was clear in the Children and Youth Surveys, and central for preschool-aged children.

"I feel safe at home" (KM; 5 years)

"I feel safe at home because that's where my Mum and Dad" (OZ; 5 years)

"At home with Mummy" (HT; 4 years)

"At home with my Mummy and Daddy" (AJ; 4 years)

"Daddy" (H; 4 years)

"My Mummy and Daddy keep me safe" (PM; 3 years)

"At home with my family. My Mummy and Daddy keep me safe" (EM; 5 years)

"We need services to have conversations, or Aboriginal people within our services to have conversations with our young people to say look at what you do, you know culture and that is important. You know how to connect with your friends and your family and your community. That's culture" (FG8. Nikita Tompkins).

"...knowing that they need to trust you and that you're not going to give up on them" (FG6. Honora Jenkins).

"...children thrive when they're with their own families. And so, it's the underpinning of supporting the whole family" (FG3. Jo Villa).

"...to feel safe and secure with one person, someone they can trust, someone that they feel like is in their corner and then that person hopefully can help them advocate for the next step and support them into the next place" (FG2. Jane Warren).

"When you build that trust with the child and that vulnerable family, you know that you have that loving relationship with their child, then they're more willing to trust you and seek guidance and support from you" (FG1. Natalie Frederick).

"...that engaging with children is one thing but engaging with their families is such an important part of engaging with the children" (FG6. Honora Jenkins).

"Wrap teams around these families. ...It's not just about the kids, it's around wrapping teams around the families, because we know that you have to help the whole family or support the whole family, not just the student (FG6. Nicole Riley).

"Just build that relationship. Knowing your families really well is going to make that difference" (FG6. Michelle Houston).

A priority area that was common across all discussions was the need to develop community capacity, awareness and understanding. The ability of community members to independently access services was important to many participants and may reduce people avoiding seeking help due to concerns of being judged or not wanting to disclose information to people close to them. This was most apparent in the consultation with young people as knowledge of support available and confidentiality was paramount.

Supporting people to develop a sense of empowerment builds community strength and resilience, and developing individualised and strengths-based approaches to connections imperative. It was clear that participants could identify many community strengths, one of which was it's people. Building capacity and allowing people to thrive is core, and the celebration of achievements powerful. Developing parent capacity was a key point from some participants, as the underpinning of a child's wellbeing. Positive messaging that people are valued and valuable, and that parents are capable has the potential to make a significant difference to people's health and wellbeing.

"They're sick of being treated like they are problems that need to be fixed" (FG4. Danna Nelse).

"There are so many avenues for people to get the message that they are not doing parenting right" (FG2. Julia Oreopoulos).

"...giving them the opportunities and reflecting back to them what they're doing well to build their confidence that they're actually doing okay" (FG2. Julia Oreopoulos).

"Some people will feel empowered if they can access a service easily, that they feel welcome and that they will not feel judged that they've made a choice for their family. They've gone out, they found what they needed in their community" (FG3. Jo Villa).

Community Opportunities

Identified themes	Key ideas
Education	Increase engagement Alternate pathways
Connection – place and space	Community hubs Specific and individualised programs
Collective and responsive approach	Allied health services All levels approach Skills for life Sustainable practices Play
Mentors, role models and champions	Goals and aspirations Everyday mentors Conversations
Community voice	Valuing people Collaboration

Table 8. Community Opportunities.

Education has been a recurring theme in each aspect of the consultation. It is no surprise that it has also been highlighted as an important opportunity that must be embraced by community for programs and support. Understanding the value of education for self-development and self-worth, as well as valuable prospects throughout life, participants highlighted two main opportunities to ensure education is accessible and attainable by all community members.

The first point was to increase engagement and retention in education and employment. School attrition was raised as a concern in groups such as young Aboriginals, and those that are considered vulnerable or disadvantaged. Engagement in education is closely connected with the provision of innovative and responsive education pathways that meet the needs of children, young people and all community members. The need for culturally specific programs and support that may improve awareness and competency, to provide opportunities that are individualised is key to engagement.

"You want for these young people, as well, to have that perspective that education is going to play a major role in your life" (FG4. Elias Rees).

"Education is a powerful tool" (FG8. Nikita Tompkins).

"...just allow young people to learn in different ways. There's not always the right way for every person. It's about you letting them experiment and try things... there will be some failures, but they will learn from that" (FG6. Stephen Dodd).

Community connection was also seen as an opportunity to improve the health and well being of children and young people. Providing spaces and places that are safe and create a sense of belonging were considered as important to participants. Children and young people need to be surrounded with people that care and will provide for their needs, one of which being food which was often discussed throughout the consultation. The need for community spaces for recreation and connection was consistent in the Children and Youth Surveys. Participants also spoke of the need to understand the social determinants of health (FG5. Health), to have a platform for creating opportunities for support.

Influential to meeting the health needs of children was extensive waiting times for access to essential health services, which at times had a negative impact on children's health and wellbeing, either due to delayed intervention or no intervention at all. Participants in Focus Group 3 (Health) suggested that an alternative program(s) for families waiting to access support may be a feasible solution. The provision of these programs may assist children and families in the short-term but may also result in families staying connected and more willing to access the appropriate support when able, or reaching a point where support is no longer required.

"...the community space where everybody.... who's got expertise can be taking their service to meet the needs of the community" (FG3. Jo Villa).

"...the creation of safe places that are conducive to physical and emotional wellbeing but also bring people together" (FG5. Nikke Gladwin).

"...the park has become a key space for families and people to get together, but we need to build and develop infrastructure that allows people to connect in an informal way" (FG5. Karen Travener-Smith).

Opportunities for holistic, collective and collaborative programs are necessary. Participants often referred to 'getting back to basics' and allowing children and young people to just 'be', to play and to engage on their own terms. Throughout the discussions, ideas such as allied health services, an all-levels approach (such as government), and developing sustainable practices were frequently mentioned. Promoting skills for life was a key item, where social, physical and emotional environments are created that support life-long success.

Focusing on the strength of the family as integral to supporting children's health and wellbeing was an important and recurring discussion. Initiatives where parents and children work in 'parallel programs' were suggested as valuable opportunities to improve connection, and sustainable and healthy relationships. Examples included experiences such as shared cooking activities, gardening, participation in school activities and synchronous community involvement. Additionally, for parents to be included in, and aware of key elements of programs was seen to be beneficial for holistic and sustainable outcomes.

"Working on parallel programs... involving parents more and just connecting the same messages we're giving to the kids... to their parents" (FG5. Kelly Andrews).

"You've got the life skills you are embedding into young people that are going to continue on with them forever. They know how to prepare a meal, but something as simple as sharing a meal like that for us as Aboriginal people is so important. Sharing a meal with our families is one of the most important things we hold, and we connect through food; its human nature" (FG8. Nikita Tompkins).

"It is providing locally based programs....... providing that connection to our young people" (FG8. Rebecca Simon).

"We cannot expect people to come to us all the time because it doesn't work. We know that and we need to meet people where they're at" (FG4. Nikke Gladwin).

"Going to the families, and volunteers bridging the gap, for families who might be lacking confidence in going to that playgroup or engaging with the community........breaking the barriers that really contribute to isolation, [being] really culturally appropriate and matching needs" (FG7. Sharlene Vlahos).

"...it's about working with the whole family unit" (FG2. Tina Read).

"...working with the whole family unit at the same time and making a space for siblings, especially within a disability context. I think sometimes we can neglect the sibling because they might have a typical need, so making a whole space for the family to interact and engage together and giving every child, including the siblings a space to participate in therapy and play with their siblings as well" (FG2. Tina Read).

"Children thrive when they are with their own families and so it's the underpinning of supporting the whole family" (FG3. Jo Villa).

"Sense of self to have that connection with family because that underpins who we are" (FG8. Nikita Tompkins).

"Two tiered approaches or two pronged approach is to work in the family. So, there's expertise in working with parents while schools work with children...schools provide a great platform" (FG6. Nikke Gladwin).

"...it's finding that connection, but then building that relationship through a level of trust" (FG1. Judy Daunt).

"...we're talking about the platforms for play and fun and development and it all builds resilience in children" (FG4, Nikke Gladwin).

" I think it's building upon their strengths and giving them opportunities and certainly for young children, opportunities to just be kids and play. There's so much seriousness in our world, particularly more so these days" (FG2. Julia Oreopoulos).

"That's what we were trying to do with the Transition to School Expo like connect allied health, disability sector with the education sector and merge into one" (FG2. Blake Stewart).

Many participants reflected on their own life experiences, and the value of having a trustworthy and safe person in their lives. These opportunities included having role models and mentors, of which could be everyday people, community leaders or those that have succeeded in other areas. Having goals and aspirations are fundamental to setting and working towards goals.

"So, every opportunity that you have with young people can have a big impact on their life" (FG4. Shaniece Igano).

"These people we need to highlight because when you see yourself in these people, you feel good and confident in the fact that you can also be an inspiration to someone else. That's what our kids need to see. They need to see local legends they can relate to" (FG8. Nikita Tompkins).

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"...it's seeing yourself in the in the role models, or in the in the roles, or just seeing yourself as reflected in the community" (FG2. Tarryn Bracken).

"What children require is role models that demonstrate ways of managing difficult situations and higher conflict in a common considered way" (FG7. Samantha Lukey).

"Finding mentors within the community....having those difficult conversations, being brave, bringing up what is right and wrong...but having belief in that person as well" (FG6. Nicole Riley).

"The amazing skills, talents, abilities of the children and actually letting them do the driving within a safe and supported context. But I think that peer learning is also something that's really, important. If you've noticed a strength in someone, then let them take the lead and explain to the rest of the group. You know, I acknowledge that that they've got something. They've got a skill there." (FG6. Honora Jenkins).

"...through those programs, possibly even finding mentors through those parents" (FG6 Nicole Riley).

"...opportunity for the one on one mentoring. It's much more resource intensive but can be really critical in achieving much stronger outcomes for an individual" (FG4. Bonnie Hittman).

"Finding the individual mentor that's got the capacity and commitment to really give time and attention to that young person" (FG4. Bonnie Hittman).

Finally, and perhaps one of the most important opportunities to be embraced by community is the need for children and young people to have a voice. The consultation process design afforded this and captured a widespread contribution from a diverse scope across the Shellharbour community. To feel valued and valuable, as well as being a collaborative partner provides an optimal environment for health and wellbeing.

"These kids are our future and I know that is such a cliched saying that children are our future. But if we don't invest in them and all of them, we're not going to get anything out of it. You know? So, we need to really start from those early years from birth right through like it needs to really be from that time that those kids are just in their early years of life. That's when you know the early years of their life. That's when it needs to start" (FG8. Nikita Tompkins).

"...we have to take a more strategic approach in terms of what's going on in larger spaces and areas, but I think you know we really need to be mindful of starting that at local level with the voices of families and children because you know they're the experts on that. Then at the end of the day, and that does start to build that sense of trust and a sense of belonging as well to" (FG5. Nikke Gladwin).

"...listen and respond to the needs and ambitions of children and young people" (FG7. Bonnie Hittman).

"...respecting those individuals and meeting them where they are and listening, engaging, expecting, taking action" (FG4. Bonnie Hittman).

"...a place of self-determination where we're in control of our own destiny" (FG8. Rebecca Simon).

"...opportunities for independence, self-determination, success and thriving" (FG4. Bonnie Hittman).

"...saying to kids "I'm glad you are here....and all people can do that, adds up to them feeling safe and secure" (FG6. Michelle Houston).

"Acknowledge the value and the gifts of the child and the strengths of that child we need to bring that to the family..... [to be] able to sit and engage and have a conversation with their child" (FG2. Blake Stewart).

"We've really got to think about the voice of the child, and we've really got to think about the voice of the parents or the families that we are speaking to and what we are doing is sort of speaking on behalf of them" (FG1. Judy Daunt).

"What the children need, and we need to ask and listen. That's really important to children" (FG1. Kathryn Barker).

"...need to have that community voice and we need to have it at all different levels. We need to have young children at the table to say this is what we want. We need them to be able to vocalise what their needs are so that we can then implement those programs. We need the Elders at the table, so then we know what their needs are to address our programs at their level" (FG8. Nikita Tompkins).

Discussion and Recommendations for Practice

The objective of the Community Consultation was to facilitate widespread conversations within the Shellharbour Community. With the State of Shellharbour's Children Report 2019 (CfC, 2019) as a foundation, the findings of these consultations will inform future planning and program delivery, including the next Strategic Plan.

The design of the Consultation (Individual, Small Group, Focus Groups and Surveys) was able to capture a diverse perspective from many community representatives. The range of consultation methods enabled participants to contribute in a way that was appropriate for them and was responsive to each individual and group. Involvement in group consultations provided participants with an opportunity to hear the perspectives of others and engage in collaborative discussion. The consultations provided rich information. In total, over 235 community members, ranging from 3-70years of age participated in the discussions. The willingness of community to participate was testament to the sense of commitment that was articulated throughout discussions.

The consultations provided a rich and deep exploration, knowledge and understanding about the Shellharbour community – the strengths, issues, priorities and opportunities. From these, recommendations for future practice have been identified, with an overarching theme of engagement and belonging. The key areas include community mentors; transitions, health and wellbeing; community places and spaces; and holistic, responsive and sustainable programs.

Community Mentors

The importance of community role models, mentors and champions was evident throughout the consultation – as a strength, as well as being a priority and opportunity. It was consistent in the consultation that a strength is the people in the Shellharbour community – their commitment, expertise and knowledge, and so this is to be embraced. The mentoring process was twofold – both for the mentor and the protégé. For children and young people to have a consistent and trusted person and/or group provides a sense of resilience and a sense of motivation for setting goals and aspirations. However, these opportunities are not exclusive to children and young people. Providing parents and families with a connection to a safe and supportive network was seen as just as critical to support children. Creating a mentoring relationship has the potential to strengthen a sense of community identity, belonging, capacity and cultural awareness. It is by engaging in these rich and supportive relationships that a position of approaching culture with humility, respect and curiosity will be achieved (Barnardos Practice Framework Principle. Approach Culture with Humility, Respect and Curiosity, 2021).

An example of a mentoring program was the Volunteer Family Connect (VFC) case study. This program provides support for families and provides an environment in which barriers are overcome. The outcomes are capable parents supporting their children to thrive in the family context.

Recommendation:

- Community mentor programs that provide opportunities for children, young people and families to connect and thrive.

- Everyday mentors that provide children and young people with positive experiences and support that will encourage motivation and aspiration to succeed.

- Programs and opportunities that promote people's capacity, are empowering and sustainable.

- Capacity building opportunities for community leaders, educators and mentors.

- 'Because every child needs a champion' (Barnardos, 2021).

"We want children, young people and families to feel that they are understood, have strong relationships and have people around them that care about them" (Barnardos Practice Principle. Build Strong Relationships and Connections, 2021).

"We partner with our clients, so they thrive" (Barnardos Practice Principle. Build Capacity, 2021).

Transitions, Health and Wellbeing

The Shellharbour community is complex, and in a period of change and uncertainty, perhaps more so than ever before. Families, school, health and the community itself are facing pressures that have the potential to negatively impact children and young people. It is critical that programs are child-focused (a Barnardos Practice Framework Principle. Barnardos, 2021) and that the health and wellbeing of children and young people is prioritised. It was clear that the family is critical in enabling children and young people to thrive.

Maslow's hierarchy of needs (Beloglovsky & Daly, 2015) provides a model where the attainment of basic needs such as physiological (food, shelter and clothing), health, safety, love and belonging will provide opportunities for children and young people to feel a sense of motivation and desire to engage in community, and therefore develop positive self-esteem, self-worth and a feeling of being valued and valuable. The provision of support and resources is critical to ensure children can reach their full potential and must become a community priority.

Self-actualisation
Desire to become the most that one can be

Esteem
Respect, self-esteem, status, recognition, strength freedom

Love and belonging
Friendship, intimacy, family, sense of connection

Safety needs
Personal security, employment, resources, health, property

Physiological needs
Air, water, food, shelter, sleep, clothing, reproduction

(Figure 25. Maslow's Hierarchy of Needs).

This approach is also shared in The Nest (A Framework to Support Children's Wellbeing. ARACY). This wellbeing framework adopts a connection of different elements (valued, loved, and safe; material basics; healthy; learning; participating; positive sense of identity and culture) that enable a child or young person to thrive (Goodhue et. al., 2021). Central is the child, and domains of support that surround the child (such as family and community) are essential in improving the wellbeing of children and young people, allowing them to be the best that they can be.

Children and young people experience a range of individual and social transitions during this period. The consultation identified that support for children and young people during important transitions are critical for engagement, staying connected and reaching their full potential. Key transitions were identified, including early childhood-primary school; primary school-high school; high school – further study or employment). It is at these times where children were seen to be most vulnerable, and the decisions and experiences influential. An example of this was provided in the 2528 'Girls ONLY' group which was established to support young girls during the transition period in early teenage years, an age group which has been identified as experiencing a lack of relevant programs and support.

Access to education and knowledge is imperative for people to feel empowered and have the capacity to support their children, as well as themselves. Throughout the consultation, participants identified that at times community members are unaware of the support services that may be available to them, or unable to find what they require. This was also apparent for some professionals. It is therefore important that a central and well-known source of information is created and made available to community. This may include a collective of various types of support, across community groups and provide the necessary details to ensure people feel empowered to independently seek support as required.

Recommendation:

- Programs that prioritise the needs (physical, social, emotional, cultural) of children, young people and families.

- Programs that support children and young people during periods of transition, with specific attention to the age group 8-15years.

- Programs that provide intensive support for children, young people and families.

- Community members are aware of, and access support for mental health.

- Community members are aware of, and access support for family and domestic violence.

- Trauma informed practices are delivered in programs across community.

- Development of a central source of information (i.e., support services) is readily accessible to all community members.

- Provision of alternative support programs while families are waiting to access essential health services.

"We recognise that trauma can have significant lifelong impacts. Our approach will contribute to the healing of our clients and communities" (Barnardos Practice Principle. Help Clients Heal from the Effects of Trauma, 2021).

Community Places and Spaces

It was evident that children, young people and families thrive when they feel a sense of safety and belonging. Providing places and spaces, such as community hubs, community centres and neighbourhood centres where people can feel a sense of ownership and responsibility are key. These have the potential to increase engagement in various ways – with others and with services. These situations may support early intervention, reduce challenges associated with knowledge and access to services and build a sense of 'community' through collaboration and sharing. Knowing that the local environment is an identified strength of the community, consideration of these as ideal locations is a priority. This concept aligns with the Barnardos Practice Framework Principle - Build Strong Relationships and Connections (Barnardos, 2021).

Children, young people and families need to feel a sense of trust and safety, identity and belonging. Creating places and spaces that are individualised, reflect the needs of the group and are culturally appropriate, such as places 'on Country' supported by identified leaders for Aboriginal community members, is paramount. Examples of this are witnessed in the case studies and programs of SYFS – 'Indigenous Network Program' and Warilla North Public School - 'Cultural Connections'.

The Ready Steady (Beyond Empathy) case study demonstrated how the capacity of young people can be enhanced through the creation of a place to engage in programs to enhance the skills and capacities of young people through developing a community podcast. The collaboration, use of skills and capturing the interests of these young members of community was evident.

Recommendation:

- Create places and spaces for children, young people and families to connect.

- Develop 'safe' community spaces for collaborative and integrated support and a holistic approach to health and wellbeing.

 "We approach our work with children, young people and families in a way that is respectful and curious of all cultures" (Barnardos Practice Principle. Approach Culture with Humility, Respect and Curiosity, 2021).

 "We listen to and advocate for the interests, wishes and views of children and young people" (Barnardos Practice Principle. Be Child Focused, 2021).

Holistic, Responsive and Sustainable Programs

Families are undoubtedly the cornerstone of community. A Barnardos Practice Framework Principle (Barnardos, 2021) is to keep families central, a concept that was valued throughout the consultation. Supporting families to be the best they can be, as well as seek and access support at times of complexity is crucial. Engaging children and parents in 'parallel programs' alongside each other may strengthen family connections, as well as a sense of belonging and identity. Furthermore, programs that are embedded within familiar contexts, such as schools and community centres have potential to be most beneficial, as well as accessible.

The provision of programs that afford meaningful and rich learning, as well as development for participants and support networks are to be prioritised. These require a reflective and flexible approach such as offering online support to deliver and/or complement the program.

'Children are growing up in a world immensely different to the previous generations…. Young people and children's access to online devices in recent years has increased dramatically' (Brettig, 2020, p24).

We need to shift the current paradigm, and as was acknowledged throughout the consultation the priority should be on play and play-based learning where fun is the objective and is at the forefront of all programs. Similarly, it is the child that is to be central. This approach is reflected in the Social Ecological framework (Feriver, 2020) which exhibits the child at the centre and the levels of influence wrapped around to support each child's wellbeing.

An example of this is the Necessity Kids / Mt Terry Public School partnership. Support is provided to children, alongside teachers gaining skills in areas of support. These opportunities allow practices to be embedded throughout the day, and for the benefit of many children.

Another example was the Warilla North Public School program as illustrated in the case study. A culturally responsive and supported 'Cultural Connect' program is offered from the school that supports young people in culturally appropriate ways to develop a sense of identity, belonging, capacity and knowledge.

This approach allows children to become embedded in culture, community and connection, *"rather than wrapped around culture or overarching or underpinning, it's actually this language of cocooning children and culture. …. that culture and not just for Aboriginal children, but for all children"* (FG7. Samantha Lukey).

Developing Communities of Practice (CoP) may be an important aspect to ensure support for families is accessible and appropriate and built around community expertise. CoP are defined as 'groups of people who share a concern, a set of problems, a passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis' (Wenger et al., 2002, p4). CoP have three key elements: 1) the community (motivated and innovative); 2) the domain (area of interest); and 3) the practice and knowledge (Brettig, 2020). The consultation process has shown these elements within the community; however, it is further collaboration and coordination that may be required to optimise these opportunities and strengthen and build upon what already exists.

Recommendation:

- Programs that support the whole family and those around the child, and not just the child in isolation.

- Parallel programs that afford opportunities for parents and children to engage in programs and activities alongside each other.

- The delivery of programs in contexts that are specific for the group, and conducive for engagement and impact.

- Develop Communities of Practice.

- Programs that foster and support attachment relationships.

- Innovative practices that respond to the complexity and changing needs of community.

- Programs that address social determinants of health.

- Evidence-driven programs that are delivered across community.

"We partner with our clients, so they thrive" (Barnardos Practice Principle. Build Capacity, 2021).

"We respect and work in partnership with families so that they achieve what is important to them" (Barnardos Practice Principle. Keep Families Central, 2021).

"We approach our work with children, young people and families in a way that is respectful and curious of all cultures" (Barnardos Practice Principle. Approach Culture with Humility, Respect and Curiosity, 2021).

"We achieve the best outcomes for our clients by ensuring our programs and services are grounded in evidence and in a framework of continual practice improvement" (Barnardos Practice Principle. Be Evidence Driven, 2021).

Conclusion

The Shellharbour Community Consultation has provided a rich insight into community. The willingness of community members to contribute was testament to the sense of community and commitment of to provide the best possible environments for children and young people to thrive.

It is important as we move into future planning and program development that we identify a measurement of outcomes. From this consultation, as well as Barnardos Practice Principles and the Draft CfC Outcomes Framework, we have the ability to foresee potential benchmarks and outcome measures.

This Community Consultation Report will be included in a suite of resources, which includes the State of Shellharbour's Children Report 2019 (CfC, 2019), to inform future Strategic Planning and program delivery. The provision of programs that are founded on quality practice, are evidence-based, and are developed in response to the collective community voice is paramount.

"...every opportunity that you have with young people can have a big impact on their life"
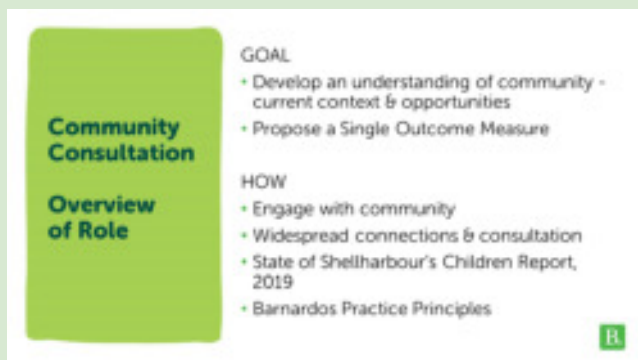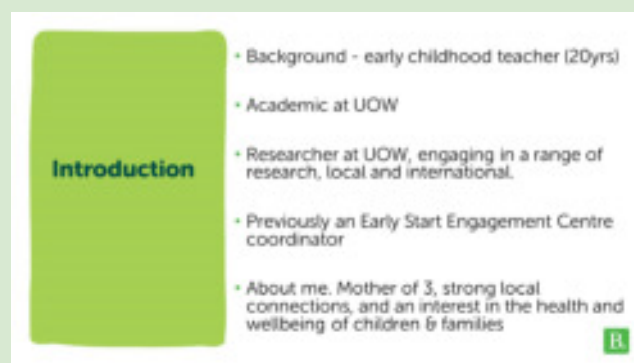(Shaniece Igano, FG4)

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Appendix

Appendix 1 — Project Timeline, 2021

	May	June	July	August	September	October	November	December
Orientation and Planning	■							
Community Consultation	■	■	■	■	■			
Literature Review	■	■	■	■	■		■	■
Partners and Committee Meetings		■			■			
Report Writing					■	■		
Final Report							■	
Dissemination and Presentation of Final Report							■	■

Appendix 2 — Presentation to a) Consultative Committee and b) Community Partners

Communities for Children Shellharbour — Barnardos Australia

Community Consultation Overview

Introduction
- Background - early childhood teacher (20yrs)
- Academic at UOW
- Researcher at UOW, engaging in a range of research, local and international.
- Previously an Early Start Engagement Centre coordinator
- About me. Mother of 3, strong local connections, and an interest in the health and wellbeing of children & families

Community Consultation Overview of Role

GOAL
- Develop an understanding of community - current context & opportunities
- Propose a Single Outcome Measure

HOW
- Engage with community
- Widespread connections & consultation
- State of Shellharbour's Children Report, 2019
- Barnardos Practice Principles

Progress
- FOCUS
Relationship building
Orientations & introductions.
Establishing timeline
Individual consultations, developing networks

- KEY DISCUSSION
Emerging issues
Priority areas
Gaps
Opportunities

Progress

- DISCUSSIONS
Period May/June.
Community & community partners, disability services, playgroup, women's health, school, TTS, council.

- INITIAL KEY IDEAS & THEMES
Strengthening Community Connections
Creating a sense of Belonging
Creating a sense of Safety

Discussion

Children's:
WELLBEING, LEARNING, FAMILY & HOME

(The State of Shellharbour's Children Report, 2019)

Focus 1: EMERGING ISSUES
- What are the emerging issues?

Focus 2: PRIORITIES
- What is important to our community?
- What are the priority areas?
- Where are the gaps?

Focus 3: OPPORTUNITIES
- What are the opportunities?

Focus 4: SINGLE OUTCOME MEASURE
What single outcome could be measured & how?

Where to from here?

- Continue individual consultation

- Group consultation / Focus groups

- Collation of key ideas for Final Report

- Propose a Single Outcome Measure

Further discussion & ideas

THANKYOU!

Appendix 3 – Focus Group Presentation

Community Consultation

September 2021

Communities for Children
Shellharbour

Barnardos Australia

Welcome & Acknowledgement

- Welcome & thank you

- Acknowledgment of Country

The 2021 National NAIDOC Poster, 'Care for Country' was designed by Justin Cuble and Maggie-Jean Douglas

Participant Information

- Participation is voluntary.

- By participating in the session you are providing consent for your discussion to be used in the consultation process.

- The session will be recorded.

- Collaborative discussion & sharing is encouraged.

- Topics may be sensitive to some participants. Your confidentiality and professionalism is appreciated.

Overview of the Community Consultation

GOAL
- Develop an understanding of the community
- Propose a Single Outcome Measure
- Inform future C/C Strategic Planning

HOW
- Widespread engagement with community
- State of Shellharbour's Children Report, 2019
- Barnardos Practice Principles

→ Individual Consultation
→ Focus Group Consultation
→ Surveys

Participant Introduction

- An introduction about you, your program/service and your role.

'Who you are, and where you are from'

Provocations

*Key ideas- identity & culture, education & mentoring

- What are the strengths of our community?

- From a child/young person/family's perspective, what is important?

- What do you see as the main issues in the community that affect children and families?

- How do we ensure families feel safe and a sense of belonging?

- What additional programs and support may help?

Final thoughts.....

- What would you like to see future headlines be?

Keen to Continue the Discussion?

Communities for Children Shellharbour

Barnardos Australia

THANKYOU!

Guiding Questions

- What are the strengths of your community?
- What are the main issues within your community?
- From a child's perspective, what is important?
- What is important to you so that you can best support children and families?
- What other programs and support may help?
- What are the main protective factors and risk factors for children and families?
- How do we ensure families feel safe and a sense of belonging?
- What would you like to see future headlines be?

Appendix 4 – Surveys (online via Survey Monkey)

Appendix 4.A – S1. Children (8-12years old)

Introduction:

Hi there!

Are you 8, 9, 10, 11 or 12 years old? If yes, keep reading!

We are looking for some quick info about what it is like to be you. We will use this information to help us understand how community organisations can help kids in your community.

You totally do not have to fill this survey out. It is your choice! If you do fill it out don't worry - no one will be able to tell that the answers are yours. The survey does not ask for your name and it does not track who you are in any way.

Please be honest and if there is a question you do not understand maybe you can ask someone you trust, or you can just skip that question!

If you want to know any more information please ask the person who has asked you to complete this survey.

Thanks so much!

For your parents/carer:

Barnardos Communities for Children is a Federal Government funded program that aims to improve the lives of children, young people and families. The objectives of the program are broadly to support a whole of community approach to early development and the wellbeing of children 0-12 years old.

The Barnardos Communities for Children project is interested in what your children think about your community and the issues that are important to them. They do not have to participate in this survey, but if they do, their responses will be anonymous and confidential. Results will be used to create a report that will assist us to make decisions about the best ways to support your community.

This survey should take 10-15 minutes to complete. Your children taking the time to contribute to this will help us to determine which programs should be funded through the Communities for Children initiative.

Questions:

Q1.   **What do you like about where you live? These types of questions can be set up as short answer**
You can write anything! Single words or sentences are cool.

Q2.   **What don't you like about where you live?**
You can write anything! Single words or sentences are fine.

Q3.   **What makes you feel safe?**
You can write anything! Single words or sentences are cool.

Q3.   **What do you like to do after school and on the weekends (before COVID restrictions)?**
You can write anything! Single words or sentences are cool.

Q4.   **Do you go to any groups with other children? (like Scouts, Youth group etc) (before COVID restrictions) This question can be set up as a multiple choice with comment**
☐   NO, why? (e.g. unsure of what is available, don't want to, can't get there, don't have the time)
☐   YES, what groups?

Q5.   **What else would you like to have where you live?**
You can write anything! Single words or sentences are cool.

Q6.   **What else would you like to be able to do where you live? (after COVID restrictions)**
You can write anything! Single words or sentences are cool.

Q7. **How old are you? This question can be set up as a multiple choice**
- ☐ 8 years old
- ☐ 9 years old
- ☐ 10 years old
- ☐ 11 years old
- ☐ 12 years old
- ☐ Other

Q8. **What is your gender? This question can be set up as a multiple choice**
- ☐ Male
- ☐ Female
- ☐ Other
- ☐ Prefer not to say

Q9. **Where do you live? This question can be set up as a multiple choice**
- ☐ Albion Park
- ☐ Albion Park Rail
- ☐ Barrack Heights
- ☐ Blackbutt
- ☐ Flinders
- ☐ Lake Illawarra
- ☐ Mt Warrigal
- ☐ Oak Flats
- ☐ Shell Cove
- ☐ Shellharbour
- ☐ Dunmore
- ☐ Warilla
- ☐ Barrack Point

End of survey

Appendix 4.B – S2. Youth (13-18years old)

Introduction:

Hi there!

Are you 13-18 years old? If yes, keep reading!

Barnardos Communities for Children is a program that aims to improve the lives of children, young people and families. The program supports the development and the wellbeing of children 0-12 years old.

We are looking for some quick info about what it is like to be you. We will use this information to help us understand how community organisations can help young people in your community.

You totally do not have to fill this survey out. It is your choice! If you do fill it out don't worry - no one will be able to tell that the answers are yours. The survey does not ask for your name and it does not track who you are in any way.

Please be honest and if there is a question you do not understand maybe you can ask someone you trust, or you can just skip that question!

If you want to know any more information please ask the person who has asked you to complete this survey.

Thanks so much!

Questions:

Q1. **What do you like about where you live? These types of questions can be set up as short answer**
You can write anything! Single words or sentences are fine.

Q10. **How old are you? This question can be set up as a multiple choice**
- ☐ 13 years old
- ☐ 14 years old
- ☐ 15 years old
- ☐ 16 years old
- ☐ 17 years old
- ☐ 18 years old
- ☐ Other

Q11. **What is your gender? This question can be set up as a multiple choice**
- ☐ Male
- ☐ Female
- ☐ Other
- ☐ Prefer not to say

Q12. **Where do you live? This question can be set up as a multiple choice**
- ☐ Albion Park
- ☐ Albion Park Rail
- ☐ Barrack Heights
- ☐ Blackbutt
- ☐ Flinders
- ☐ Lake Illawarra
- ☐ Mt Warrigal
- ☐ Oak Flats
- ☐ Shell Cove
- ☐ Shellharbour
- ☐ Dunmore
- ☐ Warilla
- ☐ Barrack Point

End of survey

Appendix 4.C – S3. Parents and Community

Introduction:

Barnardos Communities for Children is a Federal Government funded program that aims to improve the lives of children, young people and families. The objectives of the program are broadly to support a whole of community approach to early development and the wellbeing of children 0-12 years old.

We need your views! The Barnardos Communities for Children project is interested in what you think about your community and the issues that are important to you. You do not have to participate in this survey, but if you do, your responses will be anonymous and confidential. Results will be used to create a report that will assist us to make decisions about the best ways to support your community.

This survey should take 5-10 minutes to complete. You taking the time to contribute to this will help us to determine which programs should be funded through the Communities for Children initiative.

Thank you!

Questions:

Q1. **What do you like about living in the Shellharbour area? These types of questions can be set up as short answer**
You can write anything! Single words or sentences are fine.

Q2. **What don't you like about living in the Shellharbour area?**
You can write anything! Single words or sentences are fine.

Q3. **What do you see as the main issues impacting children, young people and families in the area? (tick all that apply) This question can be set up as a multiple choice, with multiple answers allowed, and comments for the 'other' option**
- ☐ mental health
- ☐ substance abuse
- ☐ crime
- ☐ homelessness
- ☐ employment
- ☐ family and domestic violence
- ☐ access and availability of services
- ☐ other (please list)

Q4. **I am confident I could access and get help from services/organisations to assist me or my family if needed**

This question can be set up as a multiple choice, and comments for the 'optional' option
- ☐ Yes
- ☐ No
- ☐ (optional) If you have used services / organisations, what are they?

Q5. **Do you (or your family) attend any groups or programs? (tick all that apply) This question can be set up as a multiple choice, with multiple allowing multiple answers allowed and comments for the No and 'other' option**
- ☐ No, we don't attend any. Why? (options - unsure of what is available, don't want to, can't get there, don't have the time, other) church-based
- ☐ playgroup
- ☐ parenting groups
- ☐ social groups
- ☐ other (please list)

Q6. **What would you like to see more of in the local community? (tick all that apply) This question can be set up as a multiple choice, with multiple allowing multiple answers allowed and comments for the No and 'other' option**
- ☐ Affordable programs/activities outside of school hours
- ☐ Playgroups/activities for children 0-5
- ☐ Community events
- ☐ A safe place for young people to hang out
- ☐ Information/programs about how to better understand or support my child
- ☐ Mental health programs for under 18s
- ☐ Other

Q7. **What do you (and your family) like to do in your free time, such as on the weekends (before COVID restrictions)?**
You can write anything! Single words or sentences are fine.

Q8. **What else would you like to have and/or be able to do where you live (after COVID restrictions)?**
You can write anything! Single words or sentences are fine.

Q9. **What is your age group? This question can be set up as a multiple choice**
- ☐ 18-24 years
- ☐ 24-30 years
- ☐ 31-40 years
- ☐ 41-50 years
- ☐ 51-60 years
- ☐ 61-70 years
- ☐ >71 years

Q10. **What is your gender? This question can be set up as a multiple choice**
- ☐ Male
- ☐ Female
- ☐ Other
- ☐ Prefer not to say

Q11. **Where do you live? This question can be set up as a multiple choice**
- ☐ Albion Park
- ☐ Albion Park Rail
- ☐ Barrack Heights
- ☐ Blackbutt
- ☐ Flinders
- ☐ Lake Illawarra
- ☐ Mt Warrigal
- ☐ Oak Flats
- ☐ Shell Cove
- ☐ Shellharbour
- ☐ Dunmore
- ☐ Warilla
- ☐ Barrack Point

End of survey

Appendix 5 – ECEC Invitation to Participate

Example of email to selected ECEC centres:

Barnardos Communities for Children are currently engaging with the Shellharbour community in a process of consultation. We are completing a series of individual and group consultation with many people within the community. The purpose of this consultation is to hear what the community feels are the main issues, gaps and opportunities.

Something that has come through strongly is the need for speaking with children. So, I was wondering if you and your team may be able to help me with this. I really do not want it to become a burden or overly time-consuming, however I would love to hear the voices of your children (and even parents if possible). This can be through annotated drawings, anecdotal conversations, recordings…. However it may work best.

Some leading questions that I would suggest may be good, include:

Where do you like to play? What do you like to do on the weekends? Where do you feel safe? What else would you like to be able to do? …. However, as you know your children far better than I do, I am happy for you to design some of your own questions. It is very open-ended, and we truly appreciate your support with this. We just want to know how children feel about where they live!

Appendix 6 – Individual Consultation Participants

Individual Consultation Participants			
Who	**Key Community Group**	**Who**	**Key Community Group**
Judy Daunt Women's Health Centre Playgroups NSW	Health Playgroup	Phillip Crawford and team Beyond Empathy	Community Partner
Claire Jones Schools as Communities	Playgroup Education	Melanie Jennison Community Centre	Neighbourhood Centre
Emma Rattenbury CfC past employee	Community	Jo Villa Sarah Beale Barnardos	Family Support
Jane Warren Supported Playgroups	Disability Playgroups	Rebecca Pragnell Playgroups NSW	Playgroup
Kim Stouse-Lee Early Start	Community	Nikke Gladwin Ed U Play	Community Partner
Roslynne Webb William Henry Noogaleek, Illawarra Aboriginal Corporation (IAC)	Community Partner Aboriginal Community	Gillian Pilkington Community Centre	Neighbourhood Centre
Brett Fahey Mission Australia	Community Partner Disability	FSA team Family Services Australia	Community Partner
Bonnie Hittman Prue Fogarty Shellharbour City Council	Local Government	Jade Kennedy UOW	Aboriginal Community
Sharlene Vlahos Grainne O'Laughlin Karitane	Health Parenting	Maree Collins Randa Warda CFC Fairfield	Community
Lindsay Burlton Green Connect	Community	Lynne Schubert South Coast Medical Service Aboriginal Corporation	Health
Blake Stewart Necessity Kids	Education Health	Deborah Willick Barnardos	Family Support
Isla Chaney Lifestart	Disability	Levenia Clulow Illawarra Legal Centre	Family Support
Matt Ball Martha Johnson Early Start	Community	SYFS team Southern Youth and Family Services	Community Partner
Honora Jenkins Kind Art Ed	Community Partner	Kelly Lester CfC Macarthur Facilitating Partner	Community
Lynda Sinnott and team Barnardos	Playgroups Family Support	Tracey Kirk Downey Wollongong City Council	Children's Services, Local Government
Liz West Helen Lewis Denise Holland Dept of Communities and Justice (Commissioning and Planning - Illawarra Shoalhaven)	Government	Nikita Tompkins Illawarra Aboriginal Medical Service	Family Support Aboriginal Community
Jo-Anne Dawe Kristen Cairncross Dept of Education	Education	Jake Pearson Interchange Illawarra	Disability
Jessica Buchanan Claudia Boiano Barnardos	Family Support	Kelly Andrews Healthy Cities Illawarra	Community Partner Health
Aunty June Lowe OAM, Aboriginal Community Elder Aboriginal Engagement Officer, Mission Australia, NSW South East	Aboriginal Community	Jenny Rowland Lily Neighbourhood Centre	Neighbourhood Centre

Individual Consultation Participants continued...			
Who	**Key Community Group**	**Who**	**Key Community Group**
Martha Vasquez Sharlene Vlahos Karitane	Family Support Health	Uncle Richard Davis ITeC, Community Elder	Aboriginal Community
Joanne Sneddon Illawarra/Shoalhaven Health	Health	Mayor Marianne Saliba Bonnie Hittman Shellharbour City Council	Local Government
Michael Willis Illawarra Koori Men's Support Group (IKMSG)	Aboriginal Community	Porsha Lake Community Centre	Neighbourhood Centre
Anna Watson MP Member for Shellharbour	State Government	Blake Stewart Jenny Hill Darrell Wallace Necessity Kids	Health

Appendix 7 – CfC Consultative Committee Members

Name	Organisation
Marie Smith	Early Years Care
Dylan Cliff	University of Wollongong (UOW)
Michelle Maitland	Disability Trust
Kristen Hirst	Department of Education
Jo-Anne Dawe	Department of Education Teaching Quality and Impact Directorate
Eva Stuhl	Miinya Biyanga Boori Aboriginal Maternal, Infant and Child Health Service and Shellharbour CFHN
Joanne English	Dept of Communities and Justice (Commissioning and Planning - Illawarra Shoalhaven)
Helen Lewis	Dept of Communities and Justice (Commissioning and Planning - Illawarra Shoalhaven)
Kathryn Baget Juleff	Shellharbour City Council
Bonnie Hittman	Shellharbour City Council
Aunty Lindy Lawler	Aboriginal Community Elder
Melissa Breuker	Community Industry Group
Samantha Lukey	University of Wollongong (UOW)
Katherine Van Weerdenburg	NSW Health
Danna Nelse	Albion Park Rail Neighbourhood Centre

Appendix 8 – CfC Community Partners

Community Partners
Beyond Empathy
Early Childhood Education Services and Training (ECTARC)
Ed U Play
Family Services Illawarra (FSI)
Healthy Cities Illawarra
Illawarra Aboriginal Cooperation (IAC)/ Noogaleek
Kind Art Ed
Mission Australia
Playgroup QLD
Southern Youth and Family Services (SYFS)
The Smith Family

Appendix 9 – Focus Group Participants

Focus Group 1	Focus Group 2	Focus Group 3	Focus Group 4
Judy Daunt Playgroups NSW Women's Health Centre	Jane Warren Supported Playgroups	Jo Villa Barnardos	Angelique Lubomirof Shellharbour City Council
Kathryn Barker ECTARC	Emma Wilkins Dept of Education	Johanne Sneddon NSW Health	Jenny Rowland Neighbourhood Centre
Natalie Frederick ECTARC	Tarryn Bracken Disability Trust	Ceiarn Graham SYFS	Shaniece Igano Beyond Empathy
Louise Whittaker ECTARC	Tina Read Playgroup QLD		Phillip Crawford Beyond Empathy
Michelle Ward Barnardos	Julia Oreopoulos Playgroup QLD		Bonnie Hittmann Shellharbour City Council
Lynda Sinnott Barnardos	Blake Stewart Necessity Kids		Danna Nelse Neighbourhood Centre
Lisa Booth ECTARC	Kirstie Wishart Starfish		Nikke Gladwin Ed U Play
Tammy Lindsay Big Fat Smile	Tiffany Soligo Mission Australia		Elias Rees Beyond Empathy
Kristen Cairncross Dept of Education			
Claire Jones Schools as Communities			
Emma Rattenbury Kids Uni			
Rachael Loustos ECTARC			
Karen Tonge Lisa O'Grady Elke Cummings	Focus Group Facilitators Barnardos CfC Shellharbour		

Focus Group 5	Focus Group 6	Focus Group 7	Focus Group 8
Nikke Gladwin Ed U Play	Nicole Riley Dept of Education	Angelique Lubomirof Shellharbour City Council	Rebecca Simon IKMSG
Nikita Tompkins IAMS	Claire Jones Schools as Communities	Bonnie Hittmann Shellharbour City Council	Nikita Tompkins IAMS
Sharlene Vlahos Karitane	Nikke Gladwin Ed U Play	Samantha Lukey UOW	Uncle Richard Davis ITeC
Lee Bratel Karitane	Kristen Cairncross Dept of Education	Sharlene Vlahos Karitane	
Kelly Andrews Healthy Cities Illawarra	Dylan Cliff UOW	Gillian Pilkington Neighbourhood Centre	
Karen Travener-Smith NSW Health	Karen Simula Dept of Education	Danna Nelse Neighbourhood Centre	
Martha Vasquez Karitane	Michelle Houston Dept of Education	Suzi Francis FSI	
	Blake Stewart Necessity Kids	Suanne Sneddon The Smith Family	
	Honora Jenkins Kind Art Ed	Janet Andrews Playgroup QLD	
	Stephen Dodd SYFS		
	Brett McVay SYFS		
	Darrell Wallace Dept of Education		
	Joanne Brassil Dept of Education		
Karen Tonge Lisa O'Grady Elke Cummings	Focus Group Facilitators Barnardos CfC Shellharbour		

Contact Us

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