

Building Community Connectedness in Broadmeadows

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The paper reports on a study of parents who participated in Communities for Children (CfC) programs in Broadmeadows during 2006/07 and forms part of the Local Evaluation Interim Report. The findings indicate that parents became more involved with their neighbours, children were more sociable and parents felt more supported after their involvement in the range of CfC activities in Broadmeadows. The first round of the surveys were conducted in 2006 (n=108) and found that parents had relatively little contact with their neighbours. By the second round of the surveys in 2007 (n=50) families – (both parents and their young children) had significantly increased their relationship with their neighbours. This is an encouraging indication that our activities are contributing to the development of community connectedness for families and young children in the CfC catchment area.

Importance of Community Connectedness

The Australian Government funds place based initiatives that emphasise a community development approach to improving outcomes for young children and their families, building on community strengths and contributing to family and community capacity building. Evidence from the Sure Start (Sure Start Unit) initiatives in Canada and the United States indicate that local, community-based initiatives are attractive to families and sustainable because they provide parents with the ability to increase their knowledge and skills around parenting, communication and play (Plowman, 2004; Sneddon & Haynes 2003).

One way of supporting families more effectively is to build social capital and promote community connectedness (Etzioni, 1996; Home, Elias & Hay 2001; Perkins, Crim, Silberman & Brown, 2004). When social capital is high and communities are well-connected, children and families benefit in a number of direct and indirect ways (Fegan & Bowes, 1999). Social capital is thought to have direct benefits for individuals and communities, including improved health, greater well-being (according to self-reported survey measures), better care for children, lower crime rates, and improved government - regions or states with higher levels of trust (Organisation for Economic Co-operation and Development, 2001).

Community connectedness is about creating a

sense of belonging. People who have family, friends, neighbours and other networks tend to be better equipped to deal with problems that arise. Researchers measure community strength by a family's ability to get help when needed, their participation in a range of community activities (such as volunteering and parental participation in schools) and community attitudes around life in their local area (such as safety and tolerance) (Department of Planning and Community Development, 2007). Tomison (1999), states that "people who feel part of a vibrant, healthy community are themselves more likely to see that they can contribute something worthwhile to that community. This then, is the beginning of a cycle of positive support and enhanced community life where individuals and the wider social group reap the rewards" (Tomison, 1999). In well-connected communities, families have many opportunities for incidental encounters with other children and other parents within the local neighbourhood. These encounters can involve the exchange of important information and they also have the potential to reduce uncertainty and alleviate parental anxiety (Fegan & Bowes, 1999).

In contrast, a lack of community connectedness can have serious social consequences such as: alienation, loneliness, low self-esteem, boredom, intolerance of others, lack of motivation, and it can negatively impact on family functioning or impair child

development (Fegan & Bowes, 1998 cited in Tomison 1999).

Neighbourhoods and community have an influence on a child's development as the first five years of a child's life are seen to impact on the rest of their lives. Australian and international researchers emphasise that parent's perception of their neighbourhoods and community is based on the neighbourhood quality (e.g., neighbourhood facilities, neighbourhood socio-economic status, level of trust, safety, help) have been found to be associated with children's outcomes (e.g., social, emotional, physical and learning) (Edwards, 2005 & 2006; Wilkenfeld, Lippman & Moore, 2007; Growing up in Australia:LSAC 2007). For example, the supportiveness of neighbours can influence children's development through social connections. When neighbours report high levels of positive social ties, children tend to have more social skills and display fewer problem behaviours (Wilkenfeld et al, 2007).

Numerous studies of children and families have shown that social support directly influences their well-being, regardless of whether or not they belong to a risk group (Crnic & Stormshak, 1997). Social support has been found to be linked to a number of negative child and family outcomes, including low birth weight (Oakley, 1992), child abuse (Gracia & Musitu, 2003) and child neglect (Connell-Carrick, 2003). It has also been shown to have an impact upon maternal adjustment (Barakat & Linney, 1992) and mental and physical health (Cooper, Arber, Fee & Ginn, 1999).

Communities for Children

Communities for Children (CfC) is an initiative funded by the Australian Government that emphasises a community development approach. The CfC initiatives under the umbrella of the National Stronger Families and Communities Strategy (SFCS) aim to improve outcomes for children and families in areas identified as 'disadvantaged' by developing and implementing local strategies for children aged 0-5, their families and the community, in partnership with the local community.

Broadmeadows UnitingCare, a local

welfare agency was appointed as part of a lead consortium to manage the project which began in 2005. The project will inject 3.5 million dollars into the local community in its period of operation May 2005 until June 2008. The role of Broadmeadows UnitingCare is to support early childhood initiatives/projects; engage community leaders; existing service providers; work with early childhood experts; promote, integrate and coordinate services; and to manage the funding and report to government. The projects operate under the guidance of a Partnership of local agencies including, health, education and welfare agencies.

The Communities for Children model has been implemented in 45 sites across Australia. The model allows for local priority setting and the addressing of local priorities. The model is open to critique on a number of grounds including that it not entirely locally developed and that the partnership models are focussed more at community agencies than at community members. However, the aim of this article is not to critique the model rather it is to outline results in a particular area of the evaluation which suggest encouraging indications that local activities are contributing to the development of community connectedness for families and young children in the CfC catchment area.

Profile of Broadmeadows

One CfC site is Broadmeadows; this site forms a small geographic corner of the City of Hume in the north west of Melbourne. The site includes the suburbs of Broadmeadows, Campbellfield, Coolaroo, Dallas, Jacana and Meadow Heights. The neighbourhoods that make up the site have long been subject to significant economic disadvantage and demonstrate associated vulnerabilities including higher than average rates of unemployment, lower income and the need to access subsidised housing. Disadvantage indicators are also evident for young children, including lower than average attendance at preschool programs and a higher than average level of developmental vulnerabilities present when children begin school (CCCH-AEDI-Hume City Community Profile 2007 & Best Start Access to Preschool Report 2007). The 2006 census reported that there were 4324 children

under 4 years old living in Broadmeadows and 11,132 in the city of Hume (Census, 2006).

The Jesuit Social Services report 'Dropping off the edge – the distribution of disadvantage in Australia' (2007) identified Campbellfield as one of Victoria's ten most disadvantaged postcodes and Broadmeadows (including Dallas and Jacana) in Victoria's 40 highest-ranking disadvantaged postcode areas (Vinson, 2007). Many of the residents in the site are subject to unemployment, income and housing disadvantage which impacts on their ability to access appropriate early-childhood family services. The 2001 Socio-Economic Index for Areas (SEIFA) - index of disadvantage ranked the Hume/Broadmeadows as the third of 197 most disadvantaged statistical local areas in Victoria (Best Start Community Profile Indicator data, 2006).

Strategies to Address Local Priorities

Broadmeadows, like other sites, followed a number of stages in its implementation of the CfC initiative. A comprehensive community consultation was conducted to inform a Community Strategic Plan that would identify local priorities. The community consultation facilitated the identification of specific neighbourhood priorities. Local agencies were invited to work within the Early Years Partnership to develop priorities that were reframed into five strategies to contribute to improving conditions for families and children in Broadmeadows. Those five strategies were further developed into 23 projects which were implemented by local agencies.

The five strategies all have a community development aspect and they are:

1. Setting the hubs humming: Inclusive meeting places for family engagement
2. Playgroups Rule ok!
3. Connecting Dots and Neurons: Promoting Health and Wellbeing
4. We are All Community: Parents and professionals working together for the community
5. Catching them all: Connecting the most vulnerable and most isolated into the community

The *Community hubs strategy* brings essential elements of existing services, including preschools, playgroups, primary

schools, childcare programs, staff and expertise, into an integrated model to provide a 'one stop shop' for parents and encourage community participation. The *Playgroups strategy* provides informal parenting support, information about services and a vehicle for increasing socialisation and education of preschool children. The *Connecting Dots and Neurons strategy* has a social health model. The activities in this strategy group focus on prevention and early intervention. *We are all community strategy* is about developing a more child and family centered community by professionals and parents working in collaboration to develop a service system that suits the needs of parents, children and families to maximize social capital. The *Catching them all strategy* is designed to incorporate activities that work with families and children to address complex needs.

Activities were framed around ensuring that there was at least one activity in each of the six local neighbourhood areas and around ensuring very local priorities were identified and met. For example, the suburb of Campbellfield did not have a playgroup and parents in that neighbourhood identified this as their number one priority. Communities for Children was able to provide a facilitated playgroup for Arabic speaking families based at Campbellfield Primary School.

Communities for Children Evaluation

Ongoing evaluation is a key component of Communities for Children programs and the initiative is being evaluated at a local level that is within each site including Broadmeadows and at a national level across all 45 sites. A local evaluation framework was developed using a program-logic approach documenting expected outcomes, objectives, local indicators and outputs by to assess the progress towards the achievements for each strategy.

In addition the Service Users Study survey, developed by the Social Policy Research Centre and the University of New South Wales-Sydney for the national evaluation of SFCS, was conducted across all five strategies. This survey aims to measure short-term outcomes for families who use CfC by surveying parent respondents at the beginning of the service use, and again when the parent

has finished using the CfC service (Social Policy Research Centre, 2007). The survey was administered to discover how parents perceive the benefits of local services including those funded by CfC.

The survey also includes modules which aim to assess parenting skills, parent and child health and satisfaction with neighbourhood, community and services service expectation and satisfaction levels. It is these modules that may demonstrate some changes in social support and social inclusion.

Method

Participants

All participants were parents of young children (0-6) who accessed services/programs provided by Communities for Children. The Service Users Study survey was distributed to parents through project workers. The surveys took about an average of 30 minutes for each parent to fill out, the survey contained 6 modules. The majority of the parents were interviewed at the programs. In 2006 part one of the study was completed by 108 parents. The survey was repeated in 2007. Of the original 108 participants, 50 parents completed the 2007 survey (figure 1).

Ninety percents of the participants were mothers and six percent were fathers. Surveyed parents came from a number of different countries/cultural backgrounds, the most common were Turkey (23% in 2006 and 24% in 2007), Australia (29% in 2006 and 18% in 2007), Iraq (10% in 2006 and 14% in 2007) and Lebanon (8% in 2006 and 14% in 2007).

A majority of parents (83% in 2006)

spoke a language other than English at home. The most common language groups were Arabic (33%) and Turkish (30%). Parents surveyed were aged between 25 and 44 years (83% of the 2006 sample and 88% of the 2007 sample). The majority of the children in the study were between 2 and 5 years (83% in 2006 and 88% in 2007).

Most parents in the study had not completed year 12 (52% in 2006) while 10% held a diploma and 13% held a degree (2006 data). Over half of the parents (54% in 2006 and 56% in 2007) relied on government benefit, pension or allowance for their main source of income. A small percentage (15% in 2006 and 16% in 2007) was in paid employment including full-time, part-time and casual work.

Procedure

Each strategy group was asked to complete a survey with parents that attended their particular activity. The survey was administered one on one with each parent either face-to-face or over the telephone. Surveys took an average of 30 minutes for each parent. The study was completed at two time points over a nine-month period. Parents who participated in both part one and two of the study received \$10 gift cards from Coles-Myer for their time.

Part one of the study was completed by 108 parent respondents in August-September 2006. The same respondents were contacted for part two of the study and a total of 50 completed the survey in May-June 2007. Nineteen phone interviews were conducted to follow up with parents who were no longer attending the activities. The decrease in the

Figure 1: Number of participants surveyed

Strategy	Part one 2006	Part two 2007
Strategy 1: Humming hubs	26	11
Strategy 2: Playgroups rule- OK!	45	29
Strategy 3: Dots and neurons	11	4
Strategy 4: We are ALL Community	20	5
Strategy 5: Catching them ALL	6	1
Total	108	50

response rate was due to difficulties in contacting participants.

Statistical analysis

The data from the two time points (2006 and 2007) has been collated and analysed by the Centre for Community Child Health using (Statistical Package for Social Sciences-SPSS) quantitative and (NVIVO) qualitative software packages.

Two tests for statistical significance were used to analyse the quantitative data from the Service User Study. Both tests have been used to determine whether there has been any significant change for participants in the period between the first and second survey.

The first test was the Wilcoxon signed ranks test. This test is the most appropriate for comparing two sets of related ordinal (i.e. ranked) data, that is, data that uses measurements of order (such as 'more' or 'less'). The Wilcoxon signed ranks test measures the consistency of differences between two sets of data. For example, if all of the differences between two sets of related data go in the same direction, either in a positive or negative direction, then this is a strong indicator that there is a difference between the two groups. However, if there are some positive and some negative differences between two sets of data this indicates that there is not a significant difference between the two groups (Hinton, Brownlow, McMurray & Cozens, 2004).

The second test used to determine statistical significance was the McNemar test. Whereas the Wilcoxon signed ranks test is used to compare numerous categories (such as very often, often, a few times a month, a few times a year, rarely and never) the McNemar test is used to determine statistical significance when the data consists of two categories only (such as 'Yes' and 'No') (Hinton et al, 2004).

It is important to note that for each individual question only the participants who provided a valid response to questions in both the 2006 and 2007 survey could be included in the analysis. This is because of the nature of the Wilcoxon signed ranks and McNemar tests which measure differences between two sets of related data. As an illustration, a participant who did not respond to a question of how

frequently they had contact with their neighbours in 2006 but responded 'every day' to that same question in 2007 was not included in the final analysis because the difference between the participant's frequency of contact could not be measured. The number of participants included in each individual analysis appears in each of the tables below.

In addition to tests for statistical significance, a qualitative analysis of relevant data was also conducted. The findings from this analysis are also reported below. The relevant data for the qualitative analysis consisted of short answer responses to questions regarding the most noticeable change in a child's development and how the service had contributed to that development. The data was analysed using NVivo qualitative software which assists in the process of identifying key themes. The frequency of these themes was also measured.

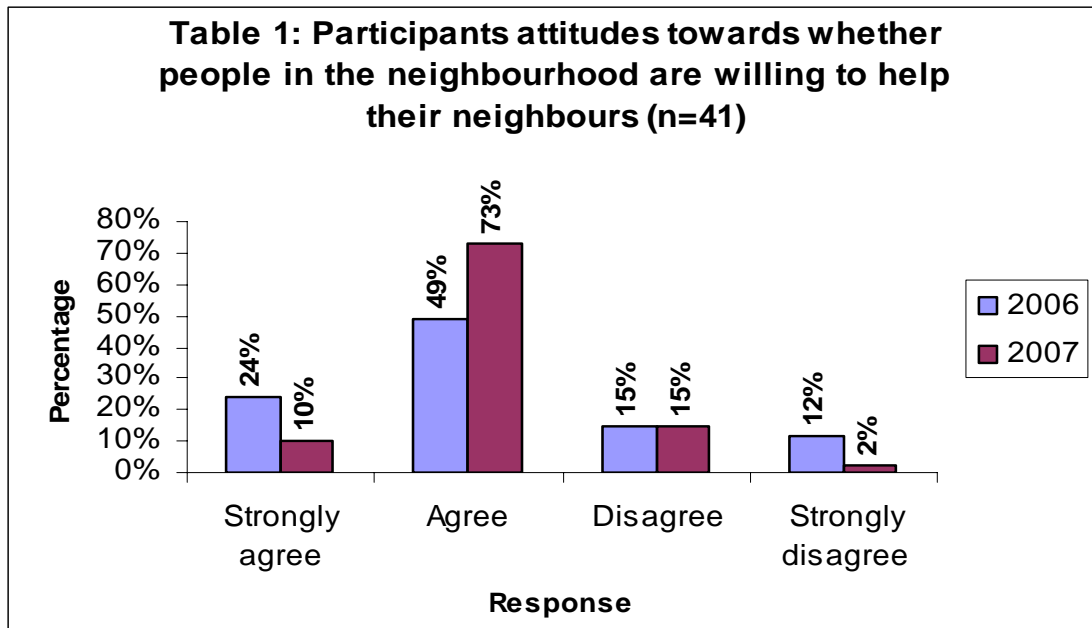
Results

Parents' attitudes towards their neighbourhood

Participants were asked to what extent they agreed or disagreed with statements about the following topics relating to their neighbourhood, the safety of their neighbourhood, the cleanliness of their neighbourhood, whether there are good parks, playgrounds and play spaces in their neighbourhood, access to close, affordable, regular public transport in their neighbourhood, access to basic shopping facilities, access to basic services such as banks and medical clinics, the safety of the neighbourhood as a place to children to play during the day and whether people in their neighbourhood are willing to help their neighbours.

The results of the Wilcoxon signed ranks test demonstrate that between the two time points there was no statistically significant difference in any of those factors. This means that although there were changes in participants' attitudes about some of these factors during the nine month period between the two surveys (see the table below as an example) participants' attitudes towards these factors in their neighbourhood did not change to a significant degree.

Table 1 illustrates participants' attitudes towards whether people in their neighbourhood



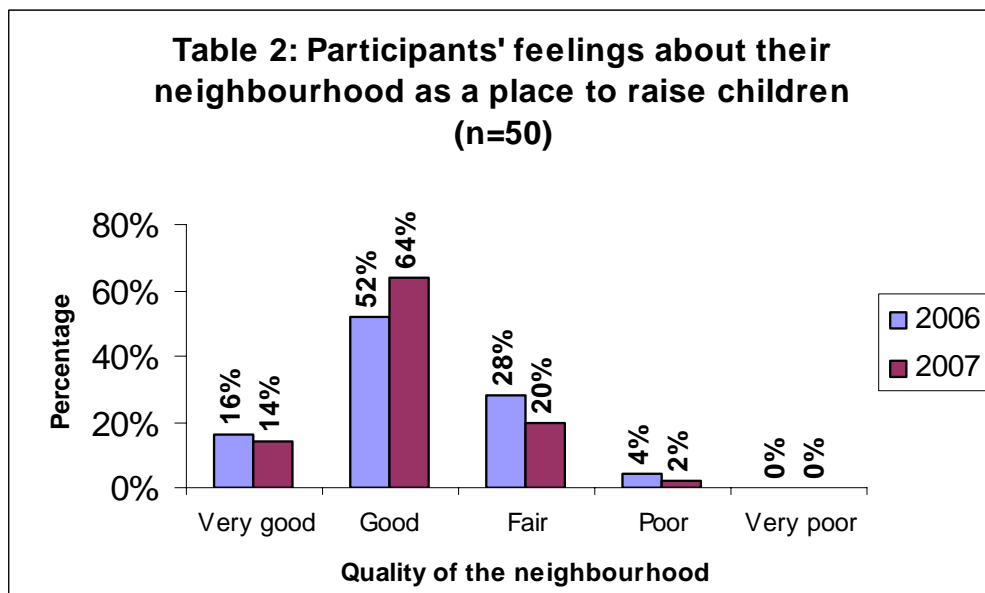
are willing to help their neighbours. In the period between the first survey and the second survey there was an increase in the percentage of participants who *agreed* with the statement that “people around here are willing to help their neighbours” (from 49% to 73%) however there was also a decrease in the percentage of participants who *strongly agreed* with this statement (from 24% to 10%). This inconsistency in the direction of the responses means that the difference between the responses in 2006 and the responses in 2007 are not statistically significant.

The majority of parents agreed at both time points that “People in the neighbourhood are willing to help their neighbours”.

Parents’ attitudes towards their neighbourhood as a place to bring up children

Participants were asked how they felt about their neighbourhood as place to bring up children. The results of the Wilcoxon signed ranks test demonstrate that between the two time points there was not a statistically significant difference in how participants’ felt about this aspect of their neighbourhood . That is, the findings suggest that during the nine month period participants were utilising the service there was no significant change in how they felt about the neighbourhood as place to bring up children.

Table 2 illustrates the frequency of responses to the question of how participants



feel about their neighbourhood as place to raise children. At the time the two surveys were conducted none of the participants felt that the neighbourhood was a *very poor* place to raise children. There were some changes in participants attitudes in the nine months between the two surveys, for example a greater percentage of participants rated the neighbourhood as a *good place* to raise children in 2007 (64%) when compared to 2006 (52%). However there was also a slight drop in the percentage of participants who rated the neighbourhood as a *very good place* to raise children in 2007 (14%) when compared to 2006 (16%).

Parents' frequency of contact with neighbours

Participants were asked how often they talked, saw or emailed: other family members, friends and neighbours to determine whether there was a change between frequency of contact between the 2006 and 2007 surveys.

The results of the Wilcoxon signed ranks test demonstrate that there was no statistically significant difference between the participants' level of contact with other family members and friends between the 2006 and 2007 survey. In other words, there was no significant change in the level of contact participants had with other family members and friends over the nine month period in which they were utilising the service. However, the same test demonstrates that there was statistical significance in the

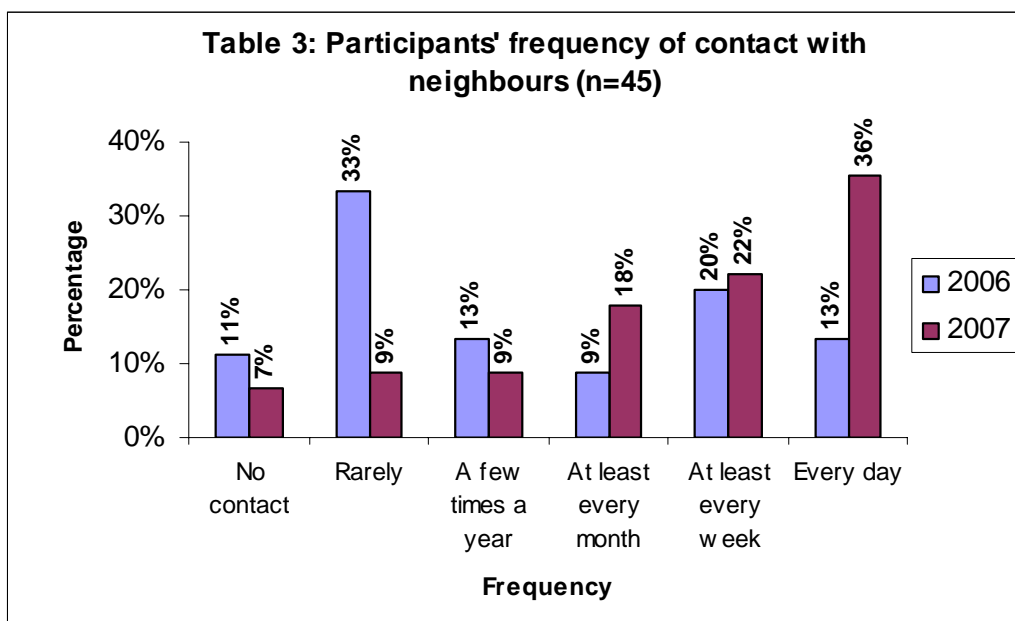
participants' level of contact with neighbours during that same time period (see table 3). Over the nine month period in which they were utilising the service participants' levels of contact with their neighbours increased significantly.

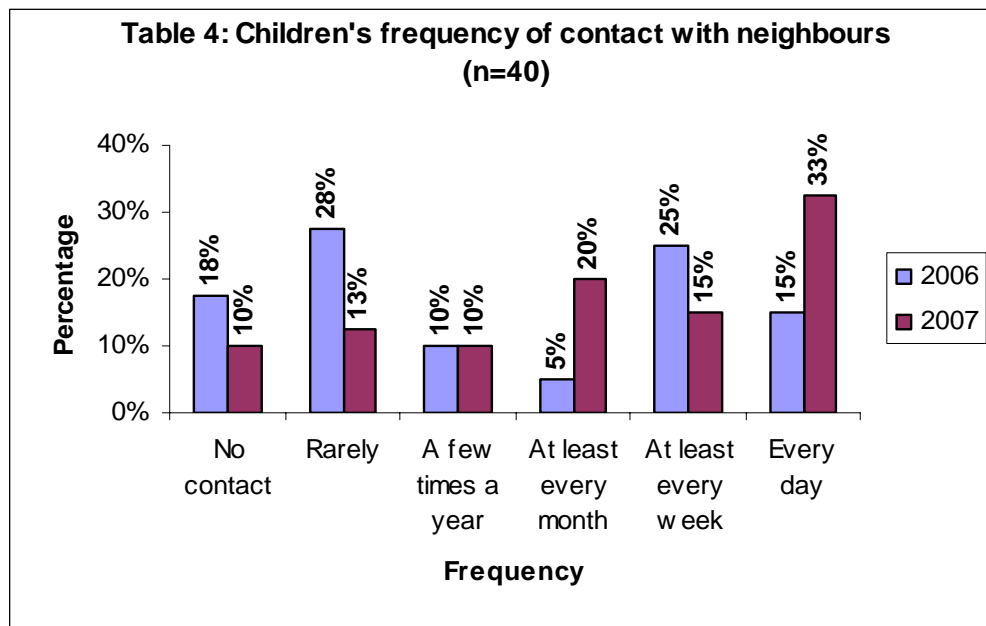
Table 3 illustrates participants' frequency of contact with their neighbours at the time the survey was conducted in 2006 and at the time they survey was conducted in 2007. The most striking figures in the graph are the percentage of participants who *rarely* talked, saw or emailed neighbours, falling from 33% to 9% in the period between two surveys, and the number of participants who talked, saw or emailed neighbours *every day*, increasing from 13% in 2006 to 36% in 2007.

Children's frequency of contact with neighbours

Participants were asked how often their child saw or spent time with: grandparents, other family members, participants' friends, participants' neighbours and other young children (outside of child care or school).

The results of the Wilcoxon signed ranks test demonstrate that between the two time periods there was no significant change in these children's level of contact with grandparents, other family members and participants' friends. That is, there was no significant change in the level of contact these children had with their grandparents, other family members or the





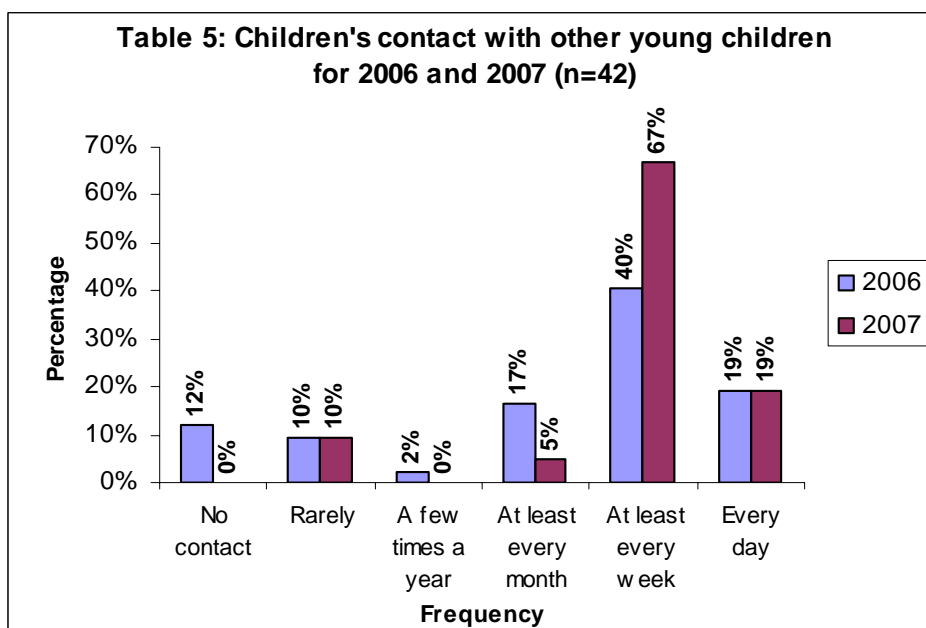
friends of their parents/caregiver other family members and friends over the nine month period in which they were utilising the service.

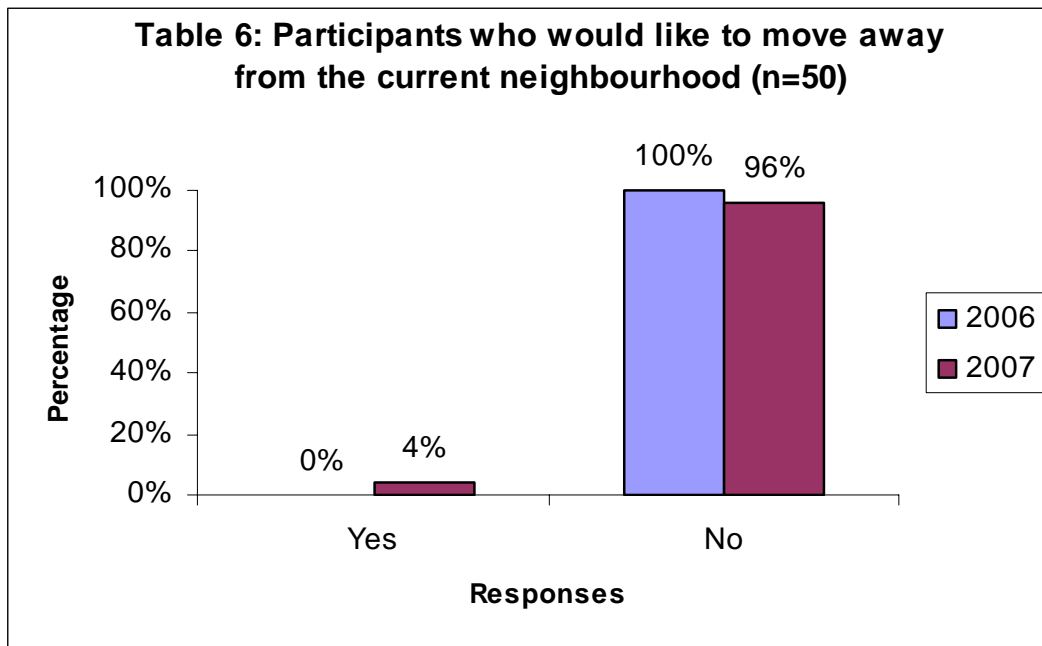
However, there was statistical significance in the participants' child's level of contact with participants' neighbours and other young children (outside of child care or school) during that same time period. Over the nine month period in which they were utilising the service these children's levels of contact with neighbours and other young children outside of child care or school increased significantly (see table 4 and 5).

Table 4 illustrates the children's frequency of contact with the participants' neighbours at the time the survey was conducted in 2006 and at the time the survey

was conducted in 2007. The most noticeable change in Table 4 are the percentage of children who *rarely* saw or spent time with neighbours, falling from 28% to 13% in the period between the 2006 and 2007 survey, and the percentage of children who saw or spent time with neighbours *every day*, increasing from 15% to 33% in the same time period.

Table 5 illustrates the participants' children's frequency of contact with other young children outside of child care or school at the time the survey was conducted in 2006 and at the time the survey was conducted in 2007. The most striking figure in Table 5 is the percentage of children who saw or spent time with other young children (outside of child or school) at least every week, increasing from





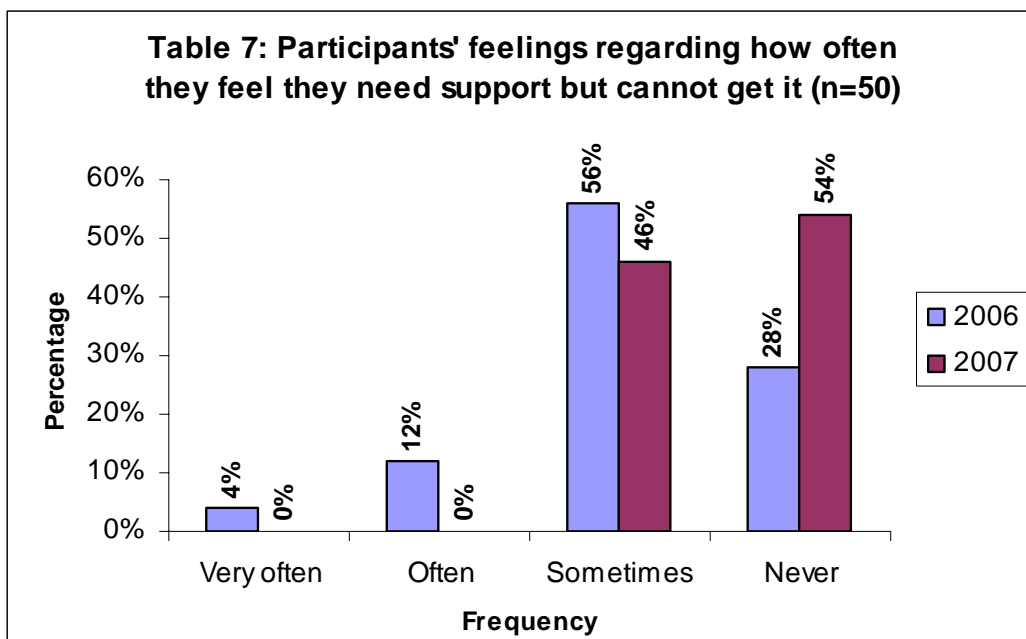
40% to 67% in the period between 2006 and 2007. All of the children who had *no contact* with other young children in 2006 (12%) had at least some contact with other young children in 2007.

Moving away from neighbourhood

Participants were asked whether currently they would like to move away from their neighbourhood. The results of the McNemar test demonstrate that between the two time periods there was no statistically significant difference in the responses to this question. That is, the findings suggest that during the nine month period they utilised the

service there was no significant increase or decrease in the proportion of participants who would like to move away from their neighbourhood.

Table 6 illustrates participants' responses to the question of whether they would like to move away from their current neighbourhood. The table demonstrates that at the time the first survey was conducted in 2006 none of the participants stated that they would like to move away from the neighbourhood and only one participant stated at the time the survey was conducted in 2007 that they would like to move away from the neighbourhood.



Levels of support available to participants

Participants were asked how often they felt they needed support or help but couldn't get it from anyone. The results of the Wilcoxon signed ranks test demonstrate that between the two time periods there was a statistically significant difference in participants' feelings about this aspect of their lives. At the second time point participants were much less likely to report feeling as if they could not get support when it was needed (see table 7).

Table 7 illustrates the frequency of responses to the question of how often participants feel they need support but cannot get it. The table shows that of the participants who reported that they *very often* or *often* can't get the support or help they need in 2006 did not feel the same way in 2007.

There was a statistically significant increase in the number of respondents who reported *never* to the question of feeling like they needed help and could not get the help or support they needed.

Most noticeable changes in child's development

For the 2007 survey participants were asked to record – in short answer format – the most noticeable change in their child's development since the 2006 survey. Forty-eight participants responded to this question. The data was analysed by identifying key themes and the frequency of these themes in individual responses was then measured.

Four key themes emerged from the data regarding the most noticeable changes in the child's development. They were: the child's increased capacity and/or willingness to share; the child's increased skills and/or interest and/or time spent playing; improved language and/or literacy skills and abilities and the child's increased capacity and/or willingness and/or confidence in socialising/interacting with other children. Each of these themes is explored further below.

The first theme was the child's increased capacity and/or willingness to share.

Of the forty-eight participants who responded to this question, 20 (48%) made reference to "sharing" as a change in this aspect of their child's behaviour. As an

illustration one participant reported:

He was jealous and didn't know how to share. [Now] he shares more and plays with me.

The second theme was the child's increased skills and/or interest and/or time spent playing.

Of the 48 participants who responded to this question, 13 (27%) referred to a change in this aspect of their child's behaviour. Participants referred to their children "learning" how to play, playing more, playing with other children and playing with other members of the family. One participant stated:

[She's] learnt how to play. At home [she was] watch[ing] TV all the time and didn't listen.

The third theme was improved language and/or literacy skills and abilities.

Of the 48 participants who responded to this question, 12 (25%) referred directly to the children's increased language and/or literacy skills and abilities. One Participant stated:

[Her] language ability has improved.

Another respondent stated:

[Now] she reads [the] alphabet.

Some participants also referred to their child's increased capacity to understand and/or their listening skills and although these responses were not coded as language and/or literacy skills and abilities (as it is not clear from the data exactly what understanding/listening skills refers to) it is possible that the children's increased capacity to listen and/or understand is related to their improved language and/or literacy skills.

The fourth theme was the child's increased capacity and/or willingness and/or confidence in socialising/interacting with other children.

Of the 48 participants who responded to this question, 11 (23%) made reference to this as a change in their child's child development.

One participant stated:

[She's] more comfortable with other kids to play. She's not shy and [she's] learnt to share.

Not surprisingly many of the participants who referred to a child's increased capacity and/or willingness to share also highlighted a change in their child's socialising behaviour.

Some of the other less frequent themes in the responses to this question were:

- Less shy (5)
- Crying less (4)
- Improvement in toilet training (3)
- Improvement in eating routine/habits (2).

It is important to point out the links between the results from the quantitative and qualitative analysis. The results of the quantitative analysis, described above, demonstrate that the participants' children had significant increases in their contact with other young children. Clearly there is a relationship between this increase in contact and the areas of development described above. For example, when asked about the most noticeable change in her child's development one participant reported that her child had "learnt to take turns and share with other children". When noting this child's frequency of interaction with other young children in 2006 the participant marked *rarely*. In 2007 when noting the frequency of the child's interaction with other young children the participant marked *every day*.

How the Service Contributed to the Changes in Child Development

Participants were also asked, in the 2007 survey, if using the service had contributed to the changes in their child's development and how it had contributed. Forty-three participants responded to this question and 2 stated that the service had not contributed to the change. Twelve other participants did not say how the service contributed to the child's development, provided only a one word response (which was not sufficient for an analysis) or repeated what they had said in the previous question. After all of these responses were excluded there were only 29 valid responses (67%) left to analyse. Two key themes emerged from the data.

The first key theme was that the service had provided the child with the opportunity to meet and/or interact and/or make friends with other children.

Ten of the 29 valid responses (34%) referred to this factor. As an example, one participant reported that the most noticeable change in [her] child's behaviour was:

My daughter now likes to sing songs and rhymes. [She's] become more social and shares [and] plays with others. She used to cling to me, now [she] plays with others. [Her] literacy has improved.

When asked how the service had contributed to this change the participant responded:

[The service has] giv[en] her the opportunity to meet other children. [It's] given her time to be ready to share with other[s]. [She's] watched other children, now she socialises, plays and talks to others.

The second key theme was that the service had helped the child to learn how to share and play.

Seven out of the 29 valid responses (24%) referred to this aspect of the service contribution. One participant stated that the most noticeable change in her child's behaviour was:

My child [has] become less aggressive. [He's] not fighting with siblings and other kids.

When asked how the service had contributed to this change the participant responded:

It was an outlet for his energy. He learnt from other children. [He] learnt about sharing and other good behaviour.

Some of the other less frequent themes in the responses to this question were:

- Contributed to parent/caregiver skills/confidence (2)
- Provided a routine (2)

- Staff have encouraged/helped child (2).

It is interesting to note that 5 participants said that the service had helped their child prepare for kindergarten or school or had influenced their enthusiasm regarding attending kindergarten or school even though this theme was only mentioned once in the previous question (which asked: 'What has been the most noticeable change in your child's development since the last survey?'). It may be that participants did not see preparation and/or enthusiasm about kindergarten or school as an aspect of their child's development. Regardless of this inconsistency between the two responses – and the possible reasons for it – it is clear that 5 participants believed that as a result of their child's their involvement with the service they are better prepared and/or more enthusiastic about starting kindergarten or school. It is likely that this increased preparation and/or enthusiasm will have a positive impact upon these children's kindergarten or school readiness.

Discussion

The Broadmeadows CfC programs and strategies – like all CfC initiatives – aimed to improve outcomes for children and families in an areas identified as disadvantaged. The local evaluation framework used a program logic approach to anticipate a range of outcomes for each strategy and for each activity. Anticipated outcomes include social connection and support, service coordination, parental skill and knowledge in various domains and child development indicators. This paper concentrates on the issues of social and community connectedness. Building social capital and promoting community connectedness was identified as an important way to improve outcomes for children and families. Social capital and community connectedness are especially important outcomes in an area such as Broadmeadows, where many members of the community are recent migrants to Australia from non-English speaking countries (Census, 2006). Social isolation is a risk for these community members as they often do not have access to the formal and informal social networks available to more established members of the

community.

Before discussing the findings it is important to highlight the limitations of this study. Firstly, the survey relied upon participants self report. Self report is a method of assessment that has been critiqued for its lack of objectivity. Secondly, the survey was not translated for the non-English speaking participants. Rather, bilingual staff and friends of participants assisted in the translation of questions and answers. There is a risk therefore that there were inconsistencies during the process of data collection because of the process of translating survey questions from one language to another. Thirdly, not all the people who took part in the CfC strategies completed a survey and more than half who completed the survey in 2006 did not complete the subsequent survey in 2007. The attrition rate from the first to the second survey may have had an impact upon the findings. For example, it is possible that those participants who completed the survey in 2007 had experienced more positive outcomes of the strategies than those who did not complete the 2007 survey. All of these limitations need to be taken into account when considering the discussion that follows.

The findings from this research suggest that in an area such as Broadmeadows CfC initiatives have the potential to impact upon community members' relationship with their surrounding neighbourhood and their sense of being supported. These findings demonstrate for example that participants involved in these services and programs experienced increased contact with their neighbours. Whilst increased contact with neighbours amongst these participants did not have a significant impact upon their attitudes towards their neighbourhood (such as whether they thought neighbours were willing to help one another) it is very possible that increased contact between neighbours will have other positive impacts upon participants, especially in terms of social connectedness.

There is also a significant improvement in participants' feelings about how often they believe they can get support when it is needed. This is an interesting finding considering there was no significant change in the frequency of

contact between participants and their family and friends. Further research could explore what aspect of these initiatives lead to participants feeling that they have increased access to support. Clearly, a sense of increased access to support is likely to have a positive impact upon an individual's sense of social connectedness.

These findings suggest that these CfC initiatives have the potential to impact positively upon children's experience of social connectedness by providing a space where children can interact and learn from one another. These initiatives had a significant impact upon children's frequency of contact with other children and, as discussed, this could be viewed as playing a role in the self reported improvements of some participants' children's social, emotional and cognitive abilities. It could also be that the participants' children's increased contact with neighbours contributed to some of those children's improved social, emotional and cognitive abilities. Furthermore, whilst the participants' attitudes towards their neighbourhood did not improve significantly further research could explore the impact that these initiatives have upon children's attitudes towards the neighbourhoods in which they live.

Summary

The findings from this study suggest that CfC initiatives in Broadmeadows had a significant impact upon some aspects of social connectedness amongst parents and children who took part in the CfC activities and strategies. The study findings demonstrate that participants in the Broadmeadows CfC initiatives did not change their, already largely positive, views about their neighbourhoods over the a nine month period during which the CfC initiatives were implemented. However, the study findings show that parents and their children increased contact with their neighbours which may, lead to the development of stronger social connections within this community. The development of stronger social connections within this particular geographical region is especially important due to the high proportion of new migrants in the area who, compared to more established members of the community, have a

higher risk of social isolation. The findings from this study suggest that the CfC initiatives implemented in Broadmeadows have very positive impacts upon children's experience of social connectedness, they provide a space for children to interact and learn from one another. This in turn is likely to have a positive impact upon their social, emotional and cognitive development.

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