

Improving *Developmental Outcomes* for Aboriginal Children in Urban and Remote Communities

WHAT IS LET'S START?

Let's Start is a therapeutic, early intervention program for children and families at risk. It is a multi-group program based on the effective Exploring Together Preschool Program (ETTP) developed at the Austin Hospital in Melbourne. Specifically adapted for the Northern Territory (NT) context, it is intended for use among young Aboriginal children and their parents in urban and remote communities. *Let's Start* aims to support family strengths and young children's social-emotional learning.

For two hours over a 10-week period, *Let's Start* brings parents and children together in a structured program of activity facilitated by trained *Let's Start* group leaders.

Parents are encouraged to support their child in developing key social, emotional and communication skills, while gaining confidence in managing difficult behaviour and establishing healthy boundaries. The program engages fathers and other carers—including kin, siblings and teachers of the participating child—thereby positively impacting on the social and emotional wellbeing of the family as a whole.

Between 2005 and 2009, *Let's Start* was successfully delivered in Darwin, Palmerston, the Tiwi Islands communities (Nguiu, Milikapiti and Pirlangimpi), Jabiru and Palumpa.

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A full copy of the *Let's Start* final evaluation report *Let's Start: Exploring Together. An Early Intervention Program for Northern Territory Children and Families* is available in PDF format for download from:
www.cdu.edu.au/letsstart

The evidence base

Key international and national research findings that underpin the rationale of *Let's Start* include:

- Early childhood is a time of maximum growth and development that is critical to a child's future health, learning, social and cultural outcomes.
- Behavioural problems in childhood can cause long-term difficulties for children and families, with problems becoming entrenched by adolescence. Intervening early reduces the long-term risk of mental health disorders, improving children's paths through life, including their attendance and performance at school (Wise et al. 2005).
- Programs aimed at improving parental early care can have significant and enduring effects on children's wellbeing (Olds et al. 2007). See Fact Sheet: *Enhancing the Social and Emotional Wellbeing of Aboriginal Children and Families*.
- In Australia, almost one-quarter of Aboriginal children aged 4–17 years are at high risk of clinically significant emotional or behavioural difficulties, significantly higher than for non-Aboriginal children (Zubrick et al. 2005).

Contexts and challenges

The varied settings of the NT require different strategies for engaging with Aboriginal children and their families. Many of the families seen deal with multiple sources of stress and instability, which impact on their ability to engage with programs such as *Let's Start*. In recognition of this, the project team put a high priority on successful **engagement** with communities, and building **resources** and **partnerships** within individual communities (see Fact Sheet: *Partnering with Aboriginal Families and Communities*), as well as further work to enhance the 'cultural fit' of the program.

Let's Start has trialled a range of implementation models to respond to the various challenges that had the potential to hinder parental participation in the program. The urban 'mainstream' program works with networks of practitioners and providers, and is open to Aboriginal and non-Aboriginal parents, and promotion occurs through multiple channels with many schools and agencies providing referrals. The program is delivered at two main sites by the *Let's Start* team and community agency staff.

In the Tiwi Islands and other remote community contexts the program is based on local partnerships between schools, preschools and wellbeing services. In the next phase of the project, *Let's Start* will focus on training local community members to engage with families and deliver *Let's Start* with support from the project team.

What was learned?

Our findings are based on 234 children who were referred and 110 children and parents who actively participated in the *Let's Start* program from 2006 to 2008:

- Participation in *Let's Start* increased parental confidence and assertiveness and stronger parent-child relationships.
- Participation in *Let's Start* led to significant improvement in children's behaviour and social skills, as reported by teachers and parents, both at program completion and at six-month follow-up.
- There is a need for post-program intervention to help parents deal with social-emotional, mental health and family issues across the child's life span.
- *Let's Start* can support the transition to school for many children.
- *Let's Start* can support improvements in parental mental health.

Ongoing work

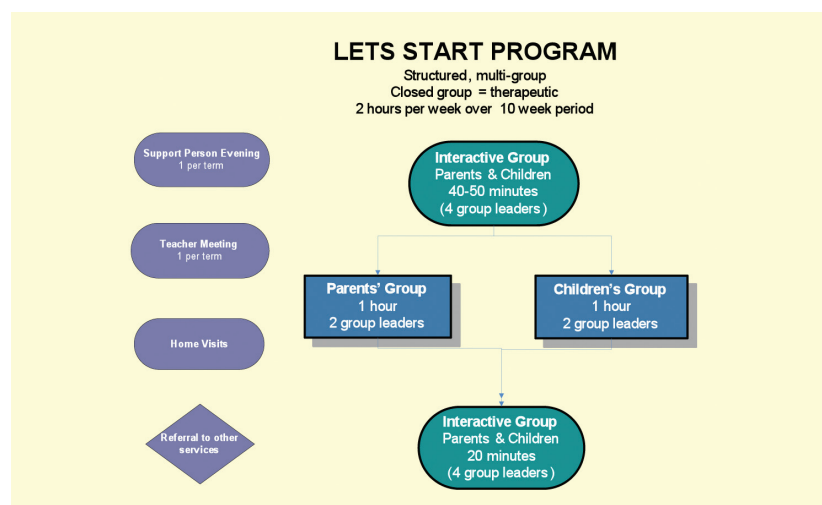
Measures to improve recruitment and retention of Aboriginal families in the *Let's Start* program include:

- Careful consideration of parents' sensitivities and feelings of stigma when choosing location and promoting the program in each community.
- Strengthening links to universal services in health and education through improved assessment, referral and feedback mechanisms.
- Developing locally informed or 'place-based' strategies to recruit and retain parents built on stronger community-based teams to work with families and children.
- Recruiting and maintaining a multi-disciplinary *Let's Start* delivery team to train and support community-based Aboriginal workers and practitioners in health and education.

A new home

In 2010, *Let's Start* entered a new phase of extension and expansion. This has been marked by the relocation of the research program to the Child Health Division at the Menzies School of Health Research, as one of a suite of innovative projects to improve developmental outcomes for Aboriginal children. Future initiatives include:

- Broadening the *Let's Start* research focus to include child development, parenting and parental wellbeing—complex areas that require multi-faceted interventions—which will involve the development of a network of research and community partnerships.
- Building program capacity for a staged expansion of *Let's Start* into new child and family centres to be established in the 20 'growth town' communities identified by the NT Government.



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