Community listening: Research overview

This resource outlines the presentation of Dr Tim Moore, Senior Research Fellow at the Centre for Community Child Health, for the webinar 'Community listening: What happens when we start with children and families?' held on 31 May 2022.

> ## Key message
> Community listening is a vital component of a new approach we need to use in engaging and working with those who are most disadvantaged.

Outline

- Where we are now
- What we have learned
- What we have tried
- How effective we have been
- What we need to do now
- Framework for collaborative decision-making
- Conclusions

Where we are now

- Rapid social change over the past several decades has dramatically altered the conditions under which families are raising young children.
- There have been enormous improvements in general prosperity, standards of living, health and longevity.
- These benefits have not been equally distributed, and there is a widening gap between those who are benefitting and those who are not.
- These social changes have also altered the nature of the problems society is facing – now more likely to be complex or wicked problems.
- The changes are occurring faster than our institutions can keep up with.
- There has been some loss of trust in government and in scientific expertise.

What we have learned

- ***Importance of first 1000 days*** (the period from conception to the end of the second year) – this is the period of maximum developmental plasticity.
- Early experiences and exposures become biologically embedded, potentially shaping health and wellbeing over the life-course.

- The health and wellbeing of children is also shaped by the health and wellbeing of their parents before conception as well as by that of their grandparents.
- ***Importance of addressing the core needs of families*** – providing them with the conditions they need in order to be able to provide their children with the conditions that the children need to flourish.
- Positive social networks are one of the key core care conditions that families need.
- ***Role of social determinants*** – social conditions have greater impact on outcomes for children and families than do the services they receive.

What we have tried

- ***The default response to wicked problems has been service-driven***: governments have focused on building better coordinated and more effective services and service systems, rather than on building more supportive communities, or on improving the interface between communities and services.
- Governments have also tended to place more reliance upon programs that address the presenting problems, rather than looking at the systemic (ecological) conditions that lead to the problems in the first place.
- There has been an overreliance on evidence-based policy and practice (with RCTs and systematic reviews as the gold standard for what works) to the exclusion of other forms of knowledge and evidence .
- There have been too few attempts to understand the lived experience of families or engage parents as co-designers of services.
- Services have become more proceduralised – using a control and command approach to service delivery – and less caring and responsive to the needs of people.
- The service system has not adapted sufficiently to the changed conditions under which families are raising young children.

Positive developments include

- place-based initiatives.
- expansion of child and family centre models.
- expansion of early childhood education options.

How effective we have been

- We have not so far made any real change at a population level to the major wicked problems of family violence, child abuse, poor school readiness, intergenerational poverty.
- We have not succeeded in reducing social inequities and inequities in health and wellbeing outcomes.
- We have not succeeded in ensuring that all families have the conditions they need for positive parenting.

- We have not succeeded is ensuring that everyone has easy and timely access to the services they need.
- We have not succeeded in engaging and meeting the needs of the most vulnerable families and communities.
- We have lost ground as result of the pandemic – those who were already vulnerable were affected most.

What do we need to do?

- We need to address the conditions under which families are raising young children – the core care conditions for families.
- We need to view the early years landscape from the perspective of families and design a social and service environment that is easy to navigate and supports all families.
- We need a different paradigm to address complex problems – based on co-design, power-sharing and continuous learning.
- We need to give families (including children) a meaningful voice – need to learn how to listen.
- We need to engage families and communities as partners in finding solutions to the challenges they face – human-centred design.
- We need a framework for collaborative decision-making at a local level.

Framework for collaborative decision-making

Like a three-legged stool, decisions need to be based on three sources and the decision-making power shared equally between the community and the service system and government.

	Family/ community perspective	Professional/ service system perspective
Evidence	What we know works here – what has already been tried	What we know works elsewhere – evidence-based programs
Data	Local-level data that relates to the immediate challenges faced by families / communities	Formal sources of data regarding population-level outcomes and outputs
Voice	Family / community lived experience – how they frame the challenges they face	What experts and services see as the main challenges to be addressed

Conclusions

- So much has changed so rapidly that the standard ways in which we have supported families of young children are no longer apt or adequate for many families and communities.
- We need a new approach to engaging and working with those who are most disadvantaged.
- This includes learning how to listen authentically to the voices of families and communities in order to understand what is most important to them and how they understand the challenges that face them.
- We need to build such listening into the way that we do business, making genuine sharing of knowledge, perspectives and power at the heart of how we support families and communities.

Resources

- Centre for Community Child Health (2010). **Engaging marginalised and vulnerable families.** *CCCH Policy Brief No. 18*. Parkville, Victoria: Centre for Community Child Health, Murdoch Children's Research Institute http://www.rch.org.au/emplibrary/ccch/PB18_Vulnerable_families.pdf
- Centre for Community Child Health (2021). **From consumer to partner: Rethinking the parent/ practitioner relationship**. Policy Brief Number 32. Murdoch Children's Research Institute/The Royal Children's Hospital, Parkville, Victoria. https://doi.org/10.25374/MCRI.14587047
- Department of Premier and Cabinet (2020). **A framework for place-based approaches.** Melbourne, Victoria: Department of Premier and Cabinet. https://www.vic.gov.au/framework-place-based-approaches
- Department of Premier and Cabinet (2020). **Human-centred design playbook**. Melbourne, Victoria: State Government of Victoria. https://www.vic.gov.au/human-centred-design-playbook
- Ingram, R. and Smith, M. (2018). **Relationship-based practice: emergent themes in social work literature.** Iriss Insight 41. Glasgow, Scotland: Iriss. https://www.iriss.org.uk/resources/insights/relationship-based-practice-emergent-themes-social-work-literature
- King, M., Ball, R. and Ma, J. (2020). **Listen Again: Deepening our understanding of how to amplify seldom heard voices through positive listening**. London, UK: Changing Lives and the Centre for Public Impact. https://www.centreforpublicimpact.org/partnering-for-impact/learning-to-listen-again
- Lent, A. and Studdert, J. (2021). **The Community Paradigm: Why public services need radical change and how it can be achieved**. London, UK: The New Local. https://www.newlocal.org.uk/publications/the-community-paradigm/
- McMillan, G. (2019). **Participation: its impact on services and the people who use them.** Iriss Insight 45. Glasgow, Scotland: Iriss https://www.iriss.org.uk/resources/insights/participation-its-impact-services-and-people-who-use-them
- Morley, S. (2015). **What works in effective Indigenous community-managed programs and organisations.** CFCA Paper No. 32. Melbourne: Australian Institute of Family Studies.

https://aifs.gov.au/cfca/publications/what-works-effective-indigenous-community-managed-program

- Moore, T.G. (2017). Authentic engagement: The nature and role of the relationship at the heart of effective practice. Keynote address at ARACY Parent Engagement Conference ~ *Maximising every child's potential* ~ Melbourne, 7th June.
https://www.rch.org.au/uploadedFiles/Main/Content/ccchdev/CCCH-ARACY-Parent-Engagement-Conference17-Paper-Oct2017.pdf

- Moore, T.G. (2021). **Core care conditions for children and families: Implications for integrated child and family services.** Prepared for Social Ventures Australia. Parkville, Victoria: Centre for Community Child Health, Murdoch Children's Research Institute, The Royal Children's Hospital.
https://doi.org/10.25374/MCRI.14593878
https://www.rch.org.au/uploadedFiles/Main/Content/ccch/images/SVA-Evidence-Review-paper-A.pdf

- Moore, T.G., McDonald, M., McHugh-Dillon, H. & West, S. (2016). **Community engagement: A key strategy for improving outcomes for Australian families.** *CFCA Paper No. 39.* Melbourne: Child Family Community Australia, Australian Institute of Family Studies.
https://aifs.gov.au/cfca/sites/default/files/cfca39-community-engagement.pdf

- National Centre on Parent, Family & Community Engagement (2018). **Relationship-Based Competencies to Support Family Engagement: Overview for Early Childhood Professionals.** Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Office of Head Start.
https://childcareta.acf.hhs.gov/sites/default/files/public/ncpfce_rbc_all_508final.pdf

- Pollard, G., Studdert, J. and Tiratell, L. (2021). **Community Power: The Evidence.** London, UK: The New Local. https://www.newlocal.org.uk/wp-content/uploads/2021/02/Community-Power-The-Evidence.pdf

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