



Growing Together

Two generation approaches with young parent-led families

Growing Together: two generation approaches with young parent-led families

A unique partnership between health, education and social support experts and parents is generating strong outcomes for young parents and their children in Caboolture.

Parenthood can be a time of great opportunity for young people to create the lives they want for themselves and their children, particularly if they can engage with effective support. However young parents are more likely than older parents to have experienced socio-economic disadvantage and traumaⁱ.

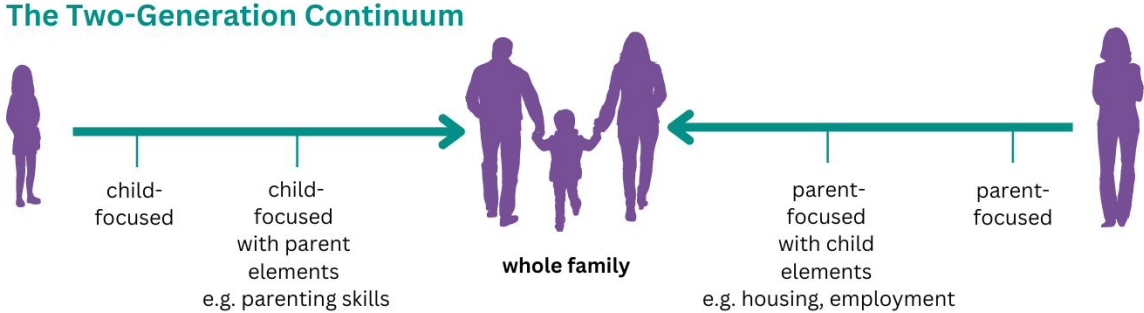
Children of young parents are at greater risk of experiencing poorer life outcomes from low birthweight to lifelong economic disadvantageⁱⁱ. Being born to a teenage parent was identified as one of ten risk indicators to predict developmental vulnerability in a recent studyⁱⁱⁱ. Children of young parents are often at risk of being removed into the care and protection system, and are also more likely to become young parents themselves^{iv}.

Developmental delays were identified for 55.5% of children assessed by the Caboolture Young Mothers for Young Women Child Health Nurse; compared with the statewide average of 24.7% in 2023-24.

Two-generation approaches improve outcomes for the whole family

Experiences like domestic and family violence, homelessness and socio-economic disadvantage impact children as well as adults. Children’s first 2000 days are critical – it’s when their brains and bodies experience huge growth. Adverse childhood experiences can have lifelong negative impacts, but research shows children’s neural pathways can be rewired – children’s brains can bounce back.

Effective two-generation approaches focus on the needs of the parent and the child both together and separately. Many family support and parenting initiatives benefit children by supporting their parents. Two-generation approaches provide direct support to children as well, reducing the impacts of trauma and promoting healthy development.



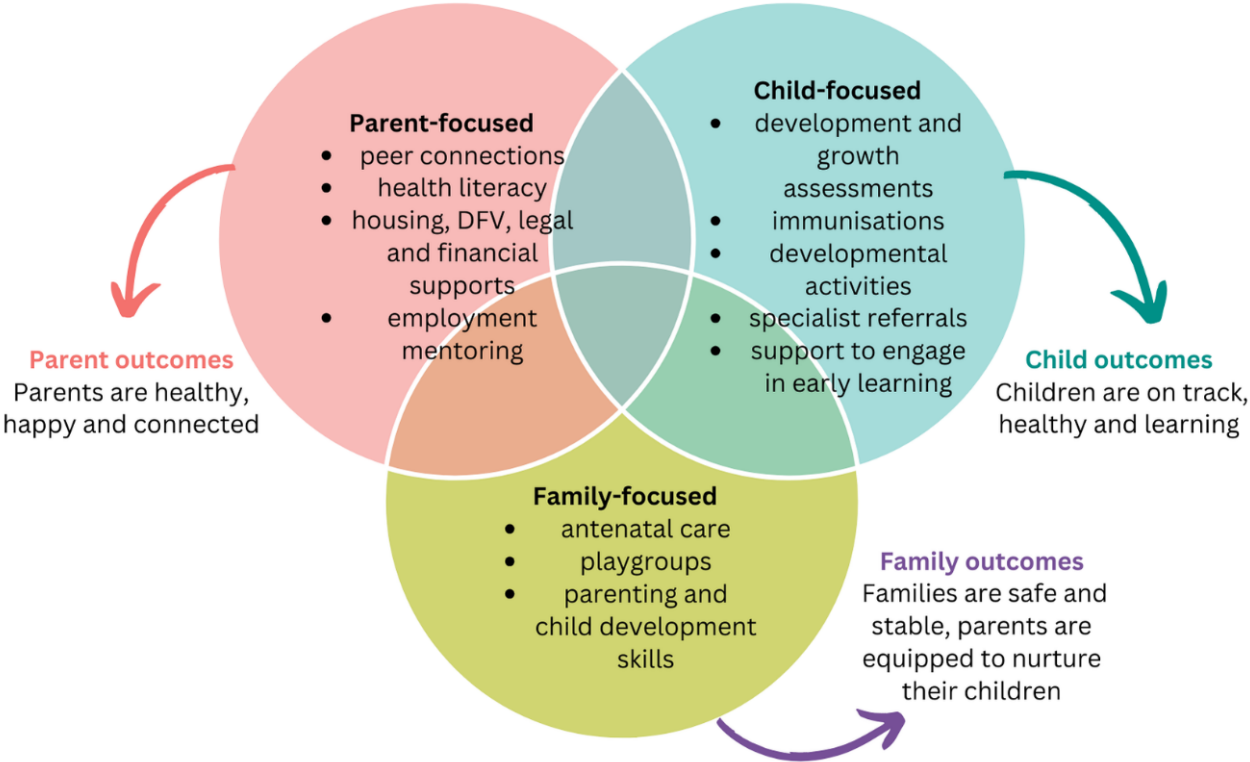
Young Mothers for Young Women

Micah Projects provides two-generation support for young parents and their children from hubs in Brisbane, Caboolture and Redcliffe. Our model brings together:

- Family Support and Advocacy Workers
- Midwives
- Child Health Nurses
- Early Childhood Educators
- Other specialist co-located services.

The teams' approach is informed by the Parents As Teachers program, a capacity development approach designed for parents experiencing adversity so they can promote their children's their children's promote school readiness, healthy growth and development. Parents and carers are their children's first and most influential teachers. Our model equips them to improve their children's readiness for school and to overcome health and social barriers influencing their trajectory.

YMYW two-generation approach and outcomes



Caboolture Young Mothers for Young Women

Young parenthood is now rare in most parts of Australia. The Caboolture area is an exception. In 2021, 172 babies were born to women aged 20 and under in the Moreton Bay North region (6.71% of babies born that year).

Young Mothers for Young Women Caboolture works with these parents and their children, supporting them through pregnancy, birth and early childhood.

Caboolture Young Mothers for Young Women 2023-24

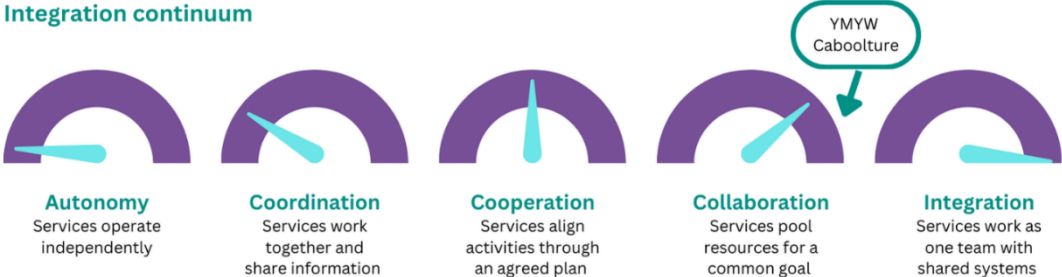
- 93 young mothers** built their capacity to support their children’s development and their ability to live the lives they want
- 92 children** benefited from playgroups, early childhood development intervention and child health assessments and referrals
- 14 young fathers** pursued goals and gained skills through targeted support from a young fathers’ worker at Caboolture

Making it happen: YMYW’s multi-disciplinary, cross-sector team

Young Mothers for Young Women Caboolture brings together a team to make their two-generation approach possible.

The team is collaborative rather than fully integrated – Child Health and Midwifery client information is stored in Queensland Health database and is not linked with Micah Projects systems, however child Ages and Stages Questionnaire assessment data is entered into both. Day-to-day information sharing is open, subject to consent from parents.

Integration continuum



| Position | Role | Employed by | Funded by |
|--|--|-------------------------|---------------------------------|
| Midwife | Assessing and triaging all young women registered with Caboolture Hospital Embedded antenatal and neonatal care for YMYW participants. | Caboolture Hospital | Child Safety via Micah Projects |
| Family Support and Advocacy Workers | Targeted case management and parenting education with parents, via outreach in homes and the community. | Micah Projects | Child Safety |
| Child Health Nurse | Growth and development assessments, parenting supports, increase in health literacy and access to specialist support via outreach. | Child Health Queensland | Queensland Health |
| Early Childhood Educator | Playgroup planning and programming, parent education, supporting developmental needs within the group particularly those with delays. | Micah Projects | Hand Heart Pocket |
| Peer worker | Support for group programs from parents with lived experience. | Micah Projects | Child Safety |
| Fathers' Support Worker | Targeted support and groups for young men connected with the young women we support. We aim to build their capacity to nurture their children. | Micah Projects | Hand Heart Pocket |



Early intervention starts before birth



The team's embedded midwife engages proactively with pregnant young women in the Caboolture Hospital catchment via a triage process once the young person registers their pregnancy with Caboolture Hospital. Those who identify a need for wrap around social and health support are offered a position in the YMYW program for antenatal care, targeted family support and the option of attending groups. After birth, the continuity of care within the team continues where families are warmly handed over to Child Health for their babies ongoing health care needs. Other young women who are under 21 years but may not require such intense support, can choose a midwifery led antenatal clinic co-located on the YMYW site or hospital-based antenatal care. Ngarrama Family Service is an option for First Nations parents.

Outcomes

Antenatal care: research shows significant increases in engagement in antenatal care and testing, among other benefits for YMYW participants, compared with a similar group of young pregnant women.

Child health: 100% of YMYW participants are up to date with child development assessments and immunisations, enabling early identification of concerns and earlier intervention where delays are identified.

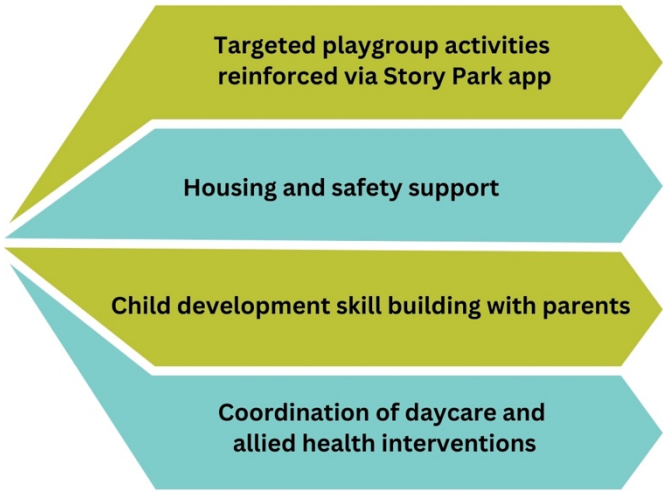
Parent capacity: Participating parents identified improvements in their knowledge, skills and ability to support their children's development, as well as improvements in their peer support networks.

“I've learned how to play with my daughter, and I can see it's making a difference.”

Amy's story



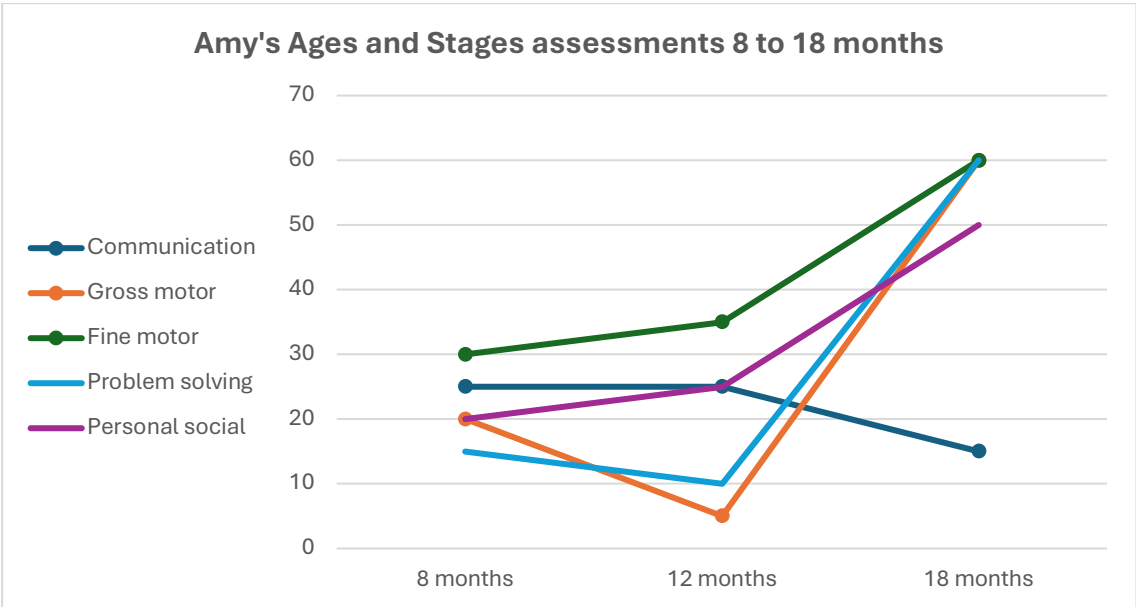
YMYW support for Amy and her family



The journey of one child, Amy, illustrates the outcomes YMYW Caboolture achieves (name changed for privacy). At eight months, the team identified delays emerging across all five developmental domains. Due to her family situation Amy had limited play opportunities at home and was spending extended periods in her cot.

The Early Childhood Educator, Child Health Nurse and Family Support and Advocacy Worker worked with Amy's parents to implement an action plan to address Amy's developmental concerns.

At 18 months, the Child Health Nurse completed an Ages and Stages assessment which showed remarkable improvement in all areas except communication. Amy has since been assessed by a speech therapist and referred for ongoing intervention, which YMYW will support the family to access.



What works: learning and evidence

Hand Heart Pocket investment in a partnership with Young Mothers for Young Women has enabled Micah Projects to trial complementary elements in our multi-disciplinary models. This has built on our established core teams in each region to improve opportunities for young parents and their children.

Here's what we know:

- **Collaboration and integration is worth the effort:** Caboolture's team includes specialists from multiple disciplines and from complex systems. Making this work requires leadership, resources and commitment. Our partners in the health and education systems make this possible.
- **Hub + outreach models are needed:** young parents' reluctance to engage in mainstream systems and services is best addressed through a combination of in-home outreach work and a safe hub where they can connect with peers and services without judgement. For a range of reasons, many vulnerable families struggle to engage with group programs and centre-based services.
- **Building parents' capacity to support children's development yields results:** providing hands-on learning that equips parents to promote their children's development can achieve dramatic results. When parents understand their child's developmental trajectory and how to support children's learning the benefits are two-fold, with parents coping better and children on track.
- **Improving family situations can improve children's development:** YMYW families navigate many challenges, including unstable housing and domestic violence. These issues impact children's development in multiple ways, including stress and limited opportunities. The role of the Family Support and Advocacy Workers in working with families on these issues is a critical foundation for improved child development.
- **Early childhood specialists get results three ways:** having an experienced Early Childhood Educator embedded in the YMYW team means that group programs meet the developmental needs of the children attending, parents learn from a trusted advisor, and the rest of the YMYW team build their knowledge and skills.
- **Fathers are part of the picture:** targeted support can equip young fathers and father figures to play an active, positive role in children's lives. At Micah Projects we are guided by young women about how we can support their partners or ex-partners to be part of their children's lives.

Where to from here?

Micah Projects is building on these learnings through a systems change lens:

| | | |
|---------------------|---|---|
| Individual | empowering each young family | <p>Increasing multi-disciplinary collaborative responses through partnerships to meet identified needs</p> <p>e.g. adding allied health workers to the YMYW mix</p> |
| Organisation | building an organization that works for young families | <p>Sharpening our understanding of what works</p> <p>e.g. creating a new outcomes measurement approach that helps us learn from data</p> |
| System | working together to improve outcomes | <p>Influencing the availability, accessibility and responsiveness of mainstream supports for young parents</p> <p>e.g. partnering to build bridges so young parents can access health, early education and child development supports and opportunities</p> |

ⁱ Australian Institute of Health and Welfare, National Framework for Protecting Australia’s Children 2009–2020: Technical paper on operational definitions and data issues for key national indicators, 2013 (Catalogue No CWS 44. Canberra: AIHW) 8; Jennifer L Marino, Lucy N Lewis, Deborah Bateson, Martha Hickey and Rachel Skinner, ‘Teenage Mothers (Focus)’ (2016) 45(10) Australian Family Physician 712, 714.

ⁱⁱ Australian Institute of Health and Welfare, National Framework for Protecting Australia’s Children 2009–2020: Technical paper on operational definitions and data issues for key national indicators, 2013 (Catalogue No CWS 44. Canberra: AIHW) 8

ⁱⁱⁱ : Pham, C., Downes, M., Guo, S., Jahan, F., De Silva, S., O’Connor, E., Gray, S., Priest, N. & Goldfeld, S. (2024). Measuring vulnerability and disadvantage in early childhood data collections: Phase Two. Centre for Community Child Health. Melbourne, Victoria. Page 9

^{iv} Jennifer Marino, Lucy Lewis, Deborah Bateson, Martha Hickey and Rachel Skinner, ‘Teenage Mothers (Focus)’ (2016) 45(10) Australian Family Physician 712, 714

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