



Centre for Community Child Health

30

YEARS



Celebrating 30 years of
advancing equitable child
health, development and
wellbeing through evidence
and innovation

MARCH 2024



Every child, every community


Our purpose is to see every child thrive.

At the Centre for Community Child Health, we're committed to tackling inequity and enabling all children to reach their potential. On the occasion of our 30th anniversary, we celebrate our past and make a commitment to our future.

From our early days to the present, the Centre for Community Child Health has been at the forefront of driving research, shaping policies, and advocating for positive change – all with the singular focus of ensuring that every child in every community thrives.

Thank you to all who have been an integral part of our 30-year journey.

Our commitment to our purpose – and our mission of making equitable, real-life improvements to children's health, development and wellbeing within a generation – remains unwavering.



Early experiences and environments shape children's lifelong health, development and wellbeing. Currently, many children lack what they need to thrive. This inequity is unfair and preventable.





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From the Director

It's very exciting to be celebrating 30 years of the Centre for Community Child Health. Given what has been achieved to date, I can't wait for the journey that lies ahead. We have, of course, not achieved this alone. Over the past 30 years, we have worked with our partners to progress toward our vision of all children thriving; this is testament to our collective passion and collaborative spirit. The challenges we now face remain substantial, but together we can make a profound and lasting difference in the lives of children and families across Australia, and increasingly across the world.

As we set our sights on the next five years, I know the Centre will continue to play a pivotal role in shaping policies and practices that ensure the holistic development and wellbeing of all children. This includes shining a light on addressing the persisting gaps in inequities and leveraging research and evidence to inform more precise and effective strategies.

Our collaboration with sector partners and community allies will continue to be a cornerstone of our work. The current momentum of the National Early Years Strategy offers a real opportunity to catalyse positive change for the benefit of children and families everywhere.

We have set out an ambitious mission of achieving equitable real-life improvements in children's health, development and wellbeing within a generation. This now guides our actions. We hope to deepen our involvement in national conversations, scale effective programs and processes, and foster collaborations that transcend boundaries. Our commitment to building evidence for impactful and data driven decision-making will remain steadfast. I am particularly enthusiastic about our growing active engagement with policymakers who are helping to shape a more equitable and supportive environment for children and their families.

As we embark on this exciting journey I want to express my sincere gratitude for your ongoing support. The next five years will undoubtedly bring new challenges, but with the collective strength of our community, I am confident that we will continue to make a meaningful and measurable difference.

Thank you for being an integral part of our shared mission. Here's to the next five years (and more!) of innovation, collaboration and transformative impact.



Professor Sharon Goldfeld

Director, Centre for Community Child Health

About us

Who we are

Our diverse team of more than 340 staff – from researchers studying populations of children to clinicians providing individual care – are committed to improving children’s health, development and wellbeing. With a focus on prevention and early intervention, we partner with families, communities, services, funders and governments to make a measurable difference for children.

We are proud to unite care, research and learning as part of the Melbourne Children’s Campus. We are a department of The Royal Children’s Hospital (RCH), a research group of the Murdoch Children’s Research Institute (MCRI), and affiliate of the University of Melbourne’s Department of Paediatrics.



What we do



Research & evaluation

We apply a range of innovative and rigorous research and learning methods to build the evidence for what works and to evaluate impact.



Clinical care

We provide exceptional paediatric care and services to children with behavioural and developmental concerns.



Systems impact

We partner with families, communities and decision makers to improve the services, systems and policies that affect children and families.



Knowledge translation & implementation

We co-produce evidence and innovations and put them into action so that children and families directly benefit.



Training & development

We provide training and capacity building opportunities for professionals and organisations working for and with children and families.



Advocacy

We use evidence to advocate for change to ensure fairer health services and better wellbeing for children and families.



Our values

Impact

We work to make **real-life improvements** for children, families and communities.

Equity

We believe **equity is a human right** and that inequities arise from preventable social, economic and geographic circumstances.

Prevention

We focus on **prevention and early intervention** so children have the building blocks for health, development and wellbeing.

Evidence

We enable **evidence-informed action** by producing, implementing and sharing evidence.

Partnerships

We **work in collaboration** with children, families, communities, practitioners, organisations and governments to achieve impact.

Learning

We support our team and partnerships to develop skills, knowledge and experience for **improvement and excellence**.

Our strategy

‘Every Child Thrives’

2024–2029

Our mission is to achieve equitable real-life improvements in children’s health, development and wellbeing within a generation.



To achieve our mission, we will focus on six impact areas:



Healthy child development

Optimising health and wellbeing outcomes for all children to address the unjust and preventable differential outcomes in children’s health and development.



Mental health for life

Driving awareness and action on child mental health through a prevention and early intervention agenda.



Connected and confident parents

Enabling support for parents and carers through formal and informal networks and the provision of evidence-based information.



Thriving communities

Working with communities to transform physical environments, supports, services and facilities to achieve better outcomes for children and families.



Education, health and social care working together

Developing cross-sectoral initiatives that recognise the inter-relationship between health, social-emotional wellbeing and educational outcomes.



Equitable services

Driving reforms of the service system to ensure all children receive early intervention, and accessible and effective care and support, particularly for families experiencing barriers to services.

In achieving our mission we will see:

- Children and their families are valued, heard and their needs are met
- Communities dedicated to supporting every child
- A system that ensures children have the best chance to thrive by creating optimal experiences and environments for living, learning and growing
- Children and their families access effective services and practices where they live, whenever they need them.

Key milestones on our journey



2001 The Commonwealth Government commences provision of **funding for paediatric fellowships in community child health.**

2001

2002 Professor Melissa Wake is appointed **lead of the Growing Up in Australia's** Health Design Team.

2002

2004 Professors Frank Oberklaid and Sharon Goldfeld and Associate Director Mary Sayers lead the national implementation of the Australian Government funded **Australian Early Development Index** (now the Australian Early Development Census) in partnership with Telethon Kids Institute.

2004

2005 The Centre partners with The Smith Family to implement the **Let's Read** literacy program in communities across Australia. Since 2005, Let's Read has been delivered in more than 100 communities with over 200,000 children participating in the program.

2005 The Centre rolls out the statewide **Victorian Infant Hearing Screening Program (VIHSP)**. VIHSP now screens over 98.5% of all Victorian newborns by one month of age, detecting hearing loss at the earliest possible time.

2005

2005 The Centre develops **Platforms**: an evidence-based approach to improving children's health, development and wellbeing. The approach has been used in several states across Australia and has informed model development in other countries.

2005 The Centre commences **Family Partnership Training** based on the Family Partnership Model developed by the UK Centre for Parent and Child Support.

2005 The Centre secures the rights to use the **Parents' Evaluation of Development Status (PEDS)** tool in Australia through an agreement between The Royal Children's Hospital and PEDSTest in the US. This paves the way for PEDS to be implemented by health departments in Vic, NSW, WA, Tas and New Zealand.

2006 The Centre forms a consortium with the Parenting Research Centre and the Smart Population Foundation and wins a government tender to **develop and implement raisingchildren.net.au** — an Australian Government funded online parenting information resource.

2006

2006 The Centre launches its flagship publication series **Policy Brief**. The series aims to stimulate informed debate about issues that affect children's health, development and wellbeing. Each issue draws on current research and evidence-informed practice.

2007 Professor Harriet Hiscock leads the establishment of the **Australian Paediatric Research Network (APRN)**, designed to engage paediatricians in research and advance knowledge about common child health problems.

2007

2007 The Centre commences the 6-year **Linking Schools and Early Years** initiative, to ensure all children are ready for school and schools are ready for all children.

2010 Professor Frank Gilliam is invited to the Centre to explore the benefits of using strategic framing in our advocacy efforts for early childhood. The visit begins **ongoing and sector-wide use of strategic framing to support communications and advocacy.**

2010

2011 Dr Paul Prichard works with the UK Centre for Parent and Child Support to implement the highly successful **Empowering Parents Empowering Communities** peer-led parenting initiative in Australia.

2012 Led by Professor Goldfeld, the Centre enters into a research collaboration with the Australian Research Alliance for Children and Youth (ARACY) and Western Sydney University to **develop and implement right@home**, a sustained nurse home visiting program for parents experiencing disadvantage.

2011

2013 Professor Wake seeds the ambitious idea of turning the state of Victoria into a single, dynamic health solutions platform for children. The resulting multi-million dollar **GenV** (Generation Victoria) initiative commences in 2017.

2012 The Centre holds a series of roundtables on **place-based transformation for communities**, contributing to vital new thinking on how to solve complex challenges.

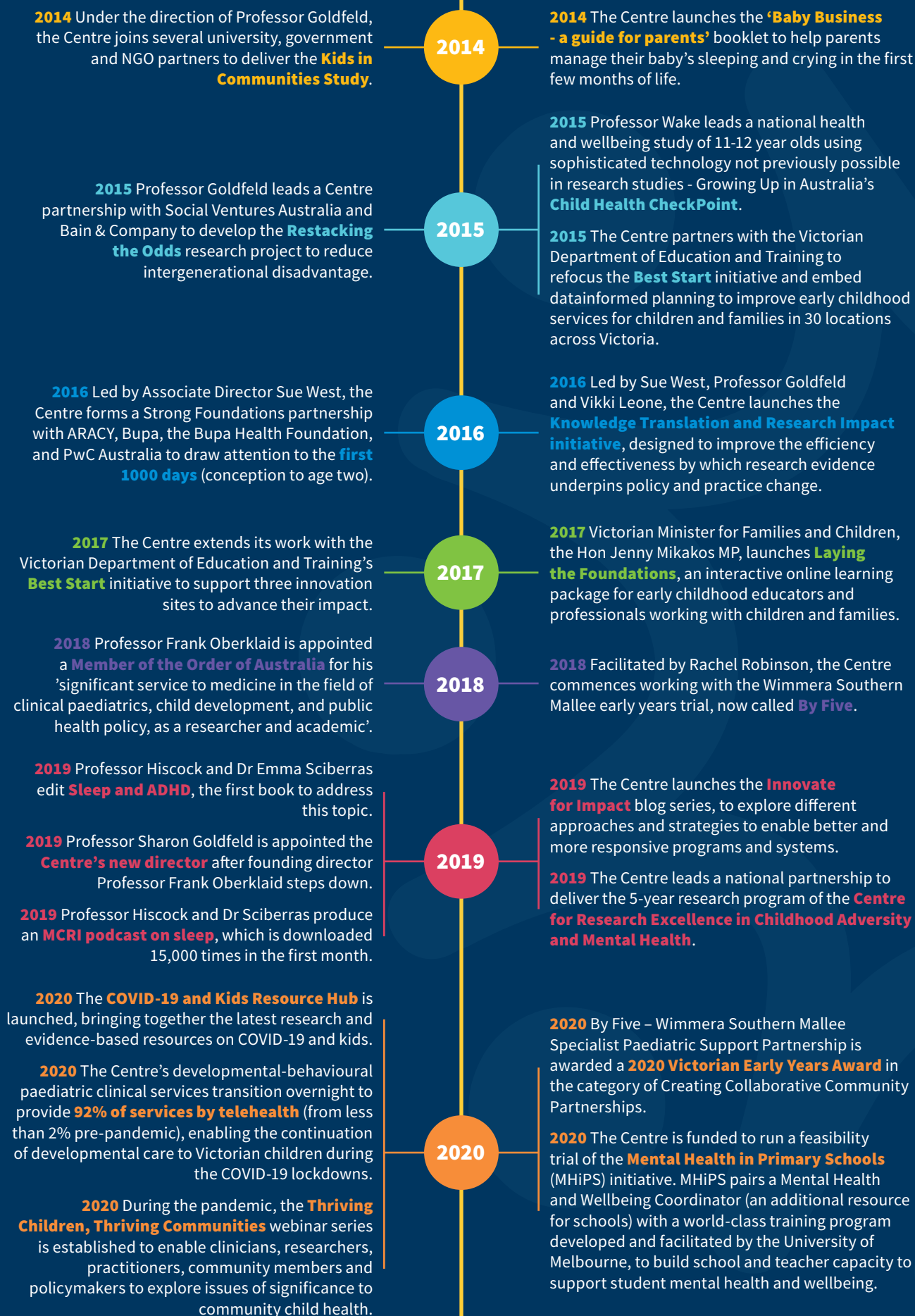
2012

2013 The **Let's Read** National Early Literacy Campaign launches.

2013

2013 The Centre launches its quarterly **newsletter** as a way to share news and updates on all the activities, events and research that make up the Centre's work.

Key milestones on our journey *continued*



2021 Restacking the Odds (RSTO) in partnership with SVA and Bain & Company secures funding for stage 2 prototyping of the RSTO project.

2021 The Centre, in partnership with the North Western Melbourne Primary Health Network, develops, implements and evaluates **COMPASS - Connecting Mental-health PAediatric Specialists and community Services**, designed to track long-term improvements in treatment and decreases in child and adolescent mental health service and emergency department presentations.

2021 The **Victorian Infant Hearing Screening Program** (VIHSP) maintains universal screening during the COVID-19 pandemic with 97% of newborn babies screened.

2021 The **MHiPS** trial is expanded to a further 16 Victorian primary schools.

2022 The Centre launches the **Children's Wellbeing Continuum**; an evidence-based tool designed to support conversations about children's mental health and wellbeing.

2022 The **Sleep with Kip** initiative launches a series of six children's books designed to teach children healthy sleep habits. The books use evidence-based, clinically validated sleep strategies to help families support children's sleep in a fun and friendly way.

2023 The Centre publishes the '**Measuring vulnerability and disadvantage in early childhood data collections report**' for the Australian Government, identifying important indicators of disadvantage in early childhood that can be used to inform more precise policy decisions to redress inequities.

2023 The Centre hosts a **Prevention Roundtable for Child Mental Health in Victoria: Strategy to Action**. The Roundtable brings together leaders to identify the action required to advance the National Children's Mental Health and Wellbeing Strategy.

2023 Professor Sharon Goldfeld facilitates a panel session at the Federal Government's **Early Years Strategy summit**, reinforcing the content of the Early Years Strategy submission made by the Centre.

2023 The Centre commences a new partnership with the Social Research Centre and Telethon Kids Institute to deliver the **Australian Early Development Census** for the Australian Government Department of Education.

2023 Professor Frank Oberklaid joins an exceptional group of Australians as **Victoria's Senior Australian of the Year**. Prof Oberklaid received the award for his internationally recognised career in children's health and development.

2021

2021 The Centre, in partnership with the Parenting Research Centre, launches **Raising Healthy Minds** - a free app filled with tips and practical ideas to help parents and carers raise confident, resilient children aged 0-12 years.

2021 An **infant saliva test** to screen for the leading infectious cause of hearing loss in babies - Cytomegalovirus or cCMV - is found to be feasible and well-received by families. The test is now being used at The Royal Children's Hospital with babies under 3 weeks diagnosed with hearing loss.

2021 The Centre establishes a partnership with the Centre for Excellence in Child and Family Welfare, to focus on **child healthcare, adversity and COVID-19**.

2022 The **MHiPS** initiative is scaled to 100 Victorian schools. The success of the evaluation leads the Victorian Department of Education to provide significant funding for a statewide rollout to every government and low-fee non-government primary school in Victoria.

2022 The publication of seminal paper **Reinventing Australian Schools** - developed in partnership with the University of Melbourne and Southern Cross University - starts a national conversation about reimagining schools for the better wellbeing, health and learning of every child.

2022 The Centre secures funding to commence a **Researcher in Residence** program.

2023 The COMPASS team are awarded first place in the 'celebrating a strong and sustainable workforce' category at the **Victorian Public Healthcare Awards**.

2023 The Victorian Infant Hearing Screening Program (VIHSP) team receive a Certificate of Recognition at the **Children's Health Care Australasia Awards** for their exceptional leadership.

2023 **MHiPS statewide expansion commences** and will reach more than 1800 Victorian primary schools by 2026.

2023 The By Five Paediatric Project receives a **Victorian Early Years Award** in recognition of its contribution to improving health and wellbeing outcomes for young children.

2023 The Hon. Dr Anne Aly, Federal Minister for Early Childhood Education, launches the **National Child and Family Hubs Network**, a national, multidisciplinary group dedicated to strengthening Child and Family Hubs across Australia.

2023

Our impact

Healthy child development



Australia's own nurse home visiting program enables children and families to thrive: right@home



The need

Supporting children's early development and learning helps build their brains and bodies, creating health and wellbeing now and into the future. Unfortunately, not all children and families receive the support they need for positive child health and development. This is particularly the case for families experiencing psychosocial and socioeconomic adversities such as poverty or low social support.

Nurse home visiting (NHV) is an evidenced-based model of care for addressing the effects of early adversity and promoting parent and child health and development. By providing targeted and intensive child and family services at home, NHV removes common barriers to accessing high quality health and social care.

However, not all NHV programs are beneficial. Programs vary according to when they begin, how long they are offered for, the types of practitioners involved, the practitioner training, and the evidence behind the program. These qualities matter and determine a program's effectiveness in addressing the impacts of early adversity.

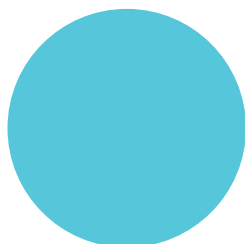
Our response

The Centre for Community Child Health formed a research collaboration with ARACY (Australian Research Alliance for Children and Youth) and the Translational Research and Social Innovation (TReSI) Group at Western Sydney University to develop and implement the 'right@home' sustained nurse home visiting program. Together, the consortium has evaluated the program through Australia's longest and largest randomised controlled trial of NHV.

right@home has been designed to optimise the key qualities of an effective NHV program for Australian families. This distinguishes it from all other NHV programs currently delivered in Australia. right@home builds the confidence and skills of parents. It supports them to care for their child, respond sensitively to their needs, and provide a nurturing home environment. These factors are important for children's brain development and their ongoing learning and behaviour.

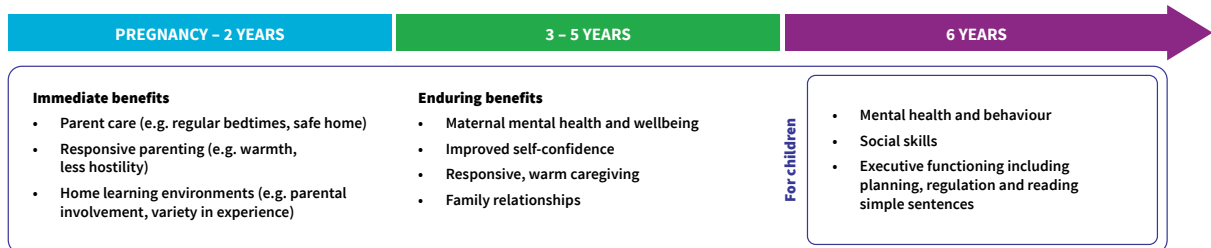
The benefits

right@home offers benefits for women, children and families, both immediate and enduring.



right@home

- ✓ focuses on prevention and early intervention
- ✓ responds to the needs of women experiencing common psychosocial and socioeconomic challenges during pregnancy
- ✓ provides continuous, responsive health and social support from pregnancy until children turn 2 years old
- ✓ is well-liked and attended by families
- ✓ is the only nurse home visiting program designed for universal healthcare systems with evaluation of long-term impacts
- ✓ is designed for delivery within Australia's existing child and family health services



“With the right@home program I had prenatal introduction to both ... the social worker and the maternal child health nurse, so the relationship therefore built from before birth and I felt comfortable having them in the home ... it helped me build my confidence ... for the first time in a long time I’m a confident mother”

Parent participant

“right@home is an example of what can be achieved through amazing partnerships and investment. Parenting supports often miss the families who are likely to benefit the most. This program is one that parents use and like and benefit from. We were able to conduct a world-class evaluation and create evidence specifically for families raising their children in Australia.”

Dr Anna Price, CCH



Developing the paediatricians of the future: The Victorian Training Program in Community Child Health

The need

Around 10-15% of children in our communities experience developmental or behavioural issues, and these children make up over 50 per cent of the caseload in general paediatric care (the recent increase in children diagnosed with Autism Spectrum Disorder is an excellent example of this area of need).

The Royal Australasian College of Physicians (RACP) is responsible for paediatric training in Australia and New Zealand. Following strong research and advocacy by members of the Centre for Community Child Health and others over many years, the RACP recognised the community need for assessment and management of children with developmental and behavioural problems. The RACP instigated a mandatory requirement that all paediatric trainees - no matter what their eventual speciality - must undertake at least six months of training in community paediatrics.

Our response

As a leader in developmental and behavioural paediatrics, the Centre for Community Child Health recognised its responsibility to provide theoretical and clinical training for paediatric trainees that would enable them to complete their training and serve their community into the future.



“Teaching and mentoring our wonderful trainee paediatricians is the highlight of my job: our children’s health and developmental care is in safe hands!”

Associate Professor Gehan Roberts, CCCH

The Victorian Training Program in Community Child Health was developed. From a small teaching program at The Royal Children’s Hospital, the program scaled rapidly. The Centre now provides specialist training annually to paediatricians from 24 health services across Victoria, the Northern Territory and Tasmania.

Since 1995, the Centre has also facilitated an annual Professional Development Program for community paediatricians. Covering a wide range of topics with a multidisciplinary focus, this program has grown from 25 participants in its early years to 450 participants in 2023, indicating the strong community need for advanced knowledge and skills in developmental behavioural paediatrics.

The benefits

More than 400 paediatricians have graduated from the Victorian Training Program over the last 30 years. They have highly developed developmental paediatric clinical skills, as well as a new understanding and focus on the importance of providing equitable care for the most vulnerable children in our community, on local capacity building, and on multidisciplinary team care approaches.

The Centre’s unwavering dedication to building the evidence, advocating for childhood behavioural and developmental concerns, and training clinicians has led to changes in training requirements for all paediatricians and has improved the quality of care provided to children in the community.



The Centre's training program has altered the professional direction of many of the trainees, with some developing a special interest in clinical research in community child health, and all of them learning a holistic approach to addressing the often complex problems these children face. Our graduates have contributed to service development, research, policy and program advocacy and development. They have influenced government priorities around early childhood, the impact of health on learning, and prevention and early intervention in child mental health.

“The Victorian Training Program in Community Child Health allows trainee paediatricians to learn not just the science, but the art of medicine, by taking us out of the hospital and into the communities where the majority of children need and receive their health and developmental care.”

Dr Elise D'Abaco, CCCH



Mental health for life



Building strong foundations for lifelong mental health and wellbeing: Mental Health in Primary Schools



The need

Child mental health and wellbeing problems are common. More than 50% of adult mental health disorders begin before the age of 14, and most have their earliest symptoms emerge before age 5. Mental health difficulties in childhood can have significant short-term and long-term negative effects. Research has linked poor childhood mental health to increased rates of unemployment, violence, poorer social functioning, substance misuse, suicide and a lower quality of life in adulthood.

Our response

The Mental Health in Primary Schools (MHiPS) initiative pairs a Mental Health and Wellbeing Coordinator (an experienced educator) with a world-class evidence-based training program to build the capability of a whole school to support student mental health and wellbeing.

“I think the Communities of Practice we do in the small groups are brilliant because it’s our network and each one of our schools is really different. I love understanding that and the flexibility there is in how the role is modified in each school.”

Mental Health and Wellbeing Coordinator

MHiPS goals

- Upskilling staff through systemic, evidence-based professional development to assist them in identifying and navigating student mental health issues.
- More mental health and wellbeing staff in the school system to relieve the burden on teachers by directly supporting students with mental health concerns and their families.
- Systemic changes to prioritise wellbeing, enabling schools to invest in preventative mental health support.



“The success of MHiPS is grounded in strong partnerships – educators, academics, clinicians, funders and government all working together to create a sustainable, evidence-based initiative to improve the lives of children.”

Dr Simone Darling, CCCH

The teacher-qualified Mental Health and Wellbeing Coordinator (MHWC) is key to the model's success and distinguishes MHiPS from other mental health initiatives in schools. The responsibility of the MHWC is to:

- build the capability of the whole school around mental health and wellbeing (identification, promotion and prevention)
- provide support to staff to better identify and support students with mental health needs
- establish clear pathways for referral for students requiring assessment and intervention.


MHiPS will reach 1800+ Victorian primary schools by 2026.

Rollout of MHiPS commenced in 2020 with a feasibility trial in 10 Victorian government schools. With the continued support of the Victorian Government, statewide expansion of the initiative commenced in 2023.


The benefits

Findings from research into MHiPS implementation and impact have been overwhelmingly positive.


Key findings




MHiPS was OVERWHELMINGLY endorsed by school staff



MHiPS INCREASED the capacity of schools and teachers to support student mental health and wellbeing



90% agree the MHWC model **INCREASED THE CAPACITY** of the whole school to support student mental health and wellbeing
(Staff survey n=1322)




90% agree the MHWC model **INCREASED THE CONFIDENCE** of teachers to support student mental health and wellbeing

Parents reported improvement in **STUDENT MENTAL HEALTH & WELLBEING**




Parents reported **GREATER KNOWLEDGE** of child mental health and wellbeing



(Parent survey n=686)


82% observed a **CHANGE IN LANGUAGE** around mental health and wellbeing




76% observed a reduction in stigma among school staff

53% observed a reduction in stigma among families


54% observed **IMPROVED ACCESS** to services



77% observed improved **STUDENT MENTAL HEALTH & WELLBEING**



84% observed increased **PRIORITISATION** of student mental health and wellbeing



(MHWC survey n=76)



“Our evaluation has found that MHiPS enhances teacher knowledge and confidence in supporting student mental health and wellbeing, reduces stigma, and increases family understanding of child mental health.”

Rachel Smith, CCCH



Centre of Research Excellence in Childhood Adversity and Mental Health



The need

Enabling children to have the best start in life involves providing equitable access to quality services and support for families. Family adversity spans health, education, social and justice sectors, therefore a multi-sectoral approach is necessary to intervene and prevent issues early. Studies show that children who face challenges or adversities in childhood are more likely to develop mental and physical health problems later in life.

Our response

The Centre was funded to lead a national partnership to deliver a five-year research program (2019-2023) – the Centre of Research Excellence (CRE) in Childhood Adversity and Mental Health. The CRE was co-funded by the National Health and Medical Research Council and Beyond Blue.

The CRE brought together families with lived experience, practitioners, researchers and policy makers from health, social care, and legal sectors with an aim to prevent the significant mental health burden experienced by children and families facing adversity.

A key goal of the CRE was to create Child and Family Hubs, codesigned with end users, that would improve children’s mental health through earlier detection and response to family adversity. The CRE partnered with universities, government agencies and non-government organisations to develop and deliver this program of work, including: Murdoch Children’s Research Institute, Beyond Blue, The University of Melbourne, Parenting Research Centre, Monash University, University of New South Wales, Wyndham City Council, North Western Melbourne Primary Health Network, Queensland Children’s Hospital, Sydney Local Health District, Healthy Homes and Neighbourhoods, IPC Health, Sydney Institute for Women, Children and their Families, Perinatal Anxiety & Depression Australia - PANDA, and Health Justice Australia.



The benefits

The CRE worked in Wyndham Vale with IPC Health and Wyndham City Council and at the Marrickville Community Health Service with Sydney Local Health District to codesign two Child and Family Hubs. Local family and service provider interviews, observation, consultation with broader local stakeholders in Wyndham Vale and Marrickville and the codesign process helped to define what the Child and Family Hubs model should look like.

The CRE also undertook a range of activities and developed a wealth of resources and supports targeted at reducing childhood adversity and mental health problems including:

- conducting a review of evidence-based strategies to provide clinicians, policymakers, educators, health service providers and families with information about which interventions are effective at preventing family adversities, reducing their negative impact on mental health, and appropriate for use in Australia
- conducting a national Resource Allocation Survey to determine next steps for tackling family adversity in Australia

- establishing a National Child and Family Hubs Network, which aims to:
 - build collective capacity by linking Hubs across Australia and support a shared language, networking and collective learning
 - define Child and Family Hubs and develop a common approach across Australia based on evidence-informed core components
 - develop an implementation and outcomes framework for Hubs
 - develop and advocate for sustainable funding models to ensure optimal investment.
- collating evidence-based resources for parents/ carers to support their children’s mental health
- publishing a raft of other evidence-based papers on the latest evidence on childhood adversity and mental health.

These resources continue the work of the CRE beyond the conclusion of the formal funding period.



“Child and Family Hubs provide a one-stop shop for families to access a wide range of supports and services. By bringing together health, education and social care services, as well as providing parents with the opportunity to build social connections, Hubs can help to identify emerging issues before they become entrenched and difficult to address, helping children to thrive.”

Dr Suzy Honisett, CCCH



Connected and confident parents



Helping families find the care they need to support children's emotions and behaviour: Child and Family eHub



The need

Getting the right support at the right time can make a big difference for children's mental health and wellbeing. It helps families overcome challenges and prevents problems from getting worse. But knowing where to find the right information or services can be difficult.

Our response

The Centre for Community Child Health, together with a national group of partners - the Victorian Department of Families, Fairness and Housing, Baker Heart and Diabetes Institute, raisingchildren.net.au, North Western Melbourne Primary Health Network, Curve Tomorrow, Infoxchange, Sydney Local Health District, University of Sydney, University of New South Wales, IPC Health, Ingham Institute for Applied Medical Research, Karitane, and Sameview - have developed the Child and Family eHub to make it easy for families to find the information and services they need to thrive.

The eHub helps families with children aged birth to 12 years. It gives families choices to help them best support their children. Created by families, researchers and health professionals, it is currently being tested in three communities as part of a study.

Key sections of the eHub include:

- Trusted information (sourced from raisingchildren.net.au)
- Find a local professional (sourced from Infoxchange)
- Online programs (including Baby Steps, Triple P, PANDA and The Brave Program)
- Find parent groups (including Playgroup Victoria and NSW, and ADHD Support Australia)
- Get immediate support (links to helplines for an emergency or crisis).

The benefits

The Child and Family eHub is the first evidence-based Australian digital platform for child mental health issues that connects families to information and a range of health, education and social services using a website platform, and that is:

- tailored to the specific needs of families with young children aged 0-12 years
- designed to deliver varying levels of supported navigation based on individual need/capacity
- integrated to meet the needs of local communities by addressing specific issues related to the social determinants of health, diversity and reach.

Research suggests connecting families to accessible information that is credible and evidence-based should lead to improved mental health outcomes for children and families.



“Engaging caregivers throughout the project from user-centred design through to acceptance testing has been key as we work towards providing families with a friendly online front door to access evidence-based information, local services, online programs and parent support groups.”

Lisa Minton, CCCH

Supporting parenting with accessible information on the go: Raising Healthy Minds



The need

To improve parents' child mental health literacy, it's important to connect parents with reliable and evidence-based information. To ensure parents feel comfortable seeking help when they need it, without fear of judgment, we need to communicate with parents in ways that work.

Our response

The Centre for Community Child Health in partnership with the Parenting Research Centre, developed the Raising Healthy Minds app; a free, personalised, pocket resource to help parents and carers raise confident, resilient children.

Raising Healthy Minds aims to support children's social and emotional wellbeing with evidence-based information. It was codesigned with parents, educators and health professionals and funded by the Australian Government.

The app includes information on specific topics like dealing with worries and making friends, as well as ideas for day-to-day life, like creating family routines, looking after yourself as a parent, and building strong relationships.

The app offers a mix of quick-read articles, videos and animations aimed at parents and carers of children aged 0-12 years. The app also delivers proactive, evidence-based 'bite-sized' information via push notifications. Parents can tailor information to the age of their child and opt-in to receive helpful tips.

The benefits

Raising Healthy Minds provides parents and carers with accessible, simple-to-use information with clear actions whenever they need it. Since launch, the app has been downloaded almost 20,000 times by parents, professionals and educators.

"I use Raising Healthy Minds if I have questions about developmental things, stuff that's going on with the kids, checking where they are at. I love that it sends me push notifications, telling me a little about what to expect."

Jo – mum of 3,
Victoria



"I'm delighted to have our team working to 'move the dial' on parent mental health literacy. There's such an opportunity to do more for children and families through primary prevention that makes use of digital approaches. Raising Healthy Minds and Raising Children Network look forward to continued innovation in this space."

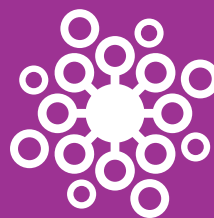
Derek McCormack, Parenting Research Centre

"I have been working on the Raising Healthy Minds app since its conception nearly five years ago, at the beginning of the COVID-19 pandemic. Despite the challenges it brought, we were able to codesign a product with parents and create content tailored to address the evolving needs of parents. I don't think there has ever been a more important time to have been involved in such a pivotal project, and it continues to be a useful resource that supports the mental health and wellbeing of children and families."

Dr Shae Wissell, CCCH



Thriving communities



Partnering for learning on an early childhood focused place-based initiative: the By Five Wimmera Southern Mallee Early Years Initiative



The need

Children born in rural areas are less likely to receive a safe, healthy and enriching start to life than their urban peers. Australian Early Development Census (AEDC) data collected in 2018 demonstrated high levels of vulnerability and a growing gap between children living in the Wimmera Southern Mallee (WSM) region of Victoria and children living in Melbourne, and that a high proportion of children were starting school with emerging health and development needs. AEDC data collected in 2021 demonstrated that this gap is widening further.

Between 2016 and 2020 an early childhood-focused place-based initiative, known as the By Five Early Years Project, was founded and delivered in response to the poor early years indicators for children. Several hundred community members, service providers and leaders from across the region committed to working together to effect service system change.

In 2021, the Wimmera Development Association was funded for a further four-year period by the Victorian Department of Education (DE) to transition the By Five Early Years Project to a community-led early years innovation and equity hub, with the goal to narrow the gap in school entry outcomes for children in WSM.

Our response

The Centre for Community Child Health has been working with By Five from the project's inception, and was initially responsible for co-leading the By Five Early Years Project along with DE. In 2022, the Centre changed roles, taking on the role of learning partner to the By Five Innovation and Equity Hub. The objective of the learning partnership is to support and build the capacity of By Five to learn within projects and across the initiative, while simultaneously strengthening a learning culture.

“Place based initiatives are a promising approach to tackling the complex issues facing children and families. Working alongside the local leaders of By Five to unpack these complexities, draw on evidence and data to develop solutions, and monitor progress is deeply rewarding. We feel privileged to be able to support the development of innovative solutions for children and families living in the Wimmera Southern Mallee region.”



Lauren Heery, CCCH



Learning activities have included individual coaching, group reflection sessions, and workshops about approaches to planning, implementation and evaluation of place-based initiatives, and have resulted in the following considerations:

- the need to lead with inquiry and curiosity
- the value of reflection
- the importance of relationship-building
- how to shift mental models to uncover different solutions.

The Centre, through The Royal Children's Hospital, is also supporting the By Five Innovation and Equity Hub's implementation of a paediatric telehealth co-consultation model; the By Five Paediatric Project. This project aims to provide families in the WSM region with access to timely paediatric care while building the capacity of local professionals and families to respond to child health and development concerns.

The benefits

To date, the By Five Innovation and Equity Hub has prototyped a successful paediatric telehealth model, established local working groups to develop solutions to early childhood education and care and antenatal service provision, and commenced a community campaign to lift the profile of children and early childhood.

As learning partner, we have supported By Five in their reflections, documenting their progress, and identifying key levers for action as this complex place-based work has evolved. The next steps will be to support the translation of further evidence-informed solutions to improve children's outcomes while also supporting sustainability and spread of the initiative.

“Having the unwavering support of the Centre and their depth of knowledge has given our team and our community so much confidence to take action to resolve issues for rural children. Our knowledge of place has genuinely been valued in our conversations and has underpinned our successful partnership and being able to effect change that matters to our children. Our partners, from schools to maternal and child health, general practice and allied health, cannot express the value of this partnership and what it has achieved in the Wimmera Southern Mallee.”

Jo Martin, Wimmera Southern Mallee Development



Enhancing child wellbeing in urban communities: A Better Start initiative

The need

Raising children in high rise public housing presents unique challenges that have the potential to affect a child's health and wellbeing. Critical factors influencing the 'first 1000 days' of a child's life (a period encompassing conception, pregnancy and a child's first two years), include the need for:

- safe communities
- secure housing
- toxin-free environments
- access to green spaces
- play-based learning opportunities
- nutritious food, and
- loving relationships.

Research suggests residents of public housing often face adverse conditions, such as overcrowding, illicit drug exposure, mould toxins, and limited access to parks or playgrounds, which can significantly affect their overall health and wellbeing. These social conditions have a greater impact on health and wellbeing outcomes for children and families than access to services.

“We strongly believe women’s experiences need to inform the future design and development of public housing. When spaces are safe for women and children, they are safer for everyone.”

Tracy Taylor-Beck,
Better Health Network



“The Better Start report provides unique insights into the experiences of mothers raising children in high rise public housing. The challenges families shared are complex, and it’s crucial that government and non-government agencies accelerate efforts to address their concerns.”

Eliza Stockdale, CCCH

Our response

In response to these challenges, the Better Health Network partnered with the Centre for Community Child Health in 2022 to explore the experiences of mothers raising children in high rise public housing. To build meaningful connections with families, a Better Start researcher was based at Park Towers, a public housing tower in South Melbourne. Various community engagement initiatives were facilitated, including 1:1 conversations, a fortnightly arts and craft group and participation in community events and initiatives. Families were invited to share and reflect on their experiences, as a parent, through photographs. Interviews with local service providers were also conducted to understand what enabled or prevented parents' access to community and health services.

Overall, 22 mothers engaged with the Better Start project, through over 50 community-based interactions. Mothers expressed feeling significantly unsafe in communal spaces within the building and surrounds, highlighting concerns about frequent incidents of violence, exposure to illicit substance use, and challenging behaviours of some residents. They also shared photos and examples of substandard building maintenance, contributing to increased exposure to environmental allergens.

The benefits

This study and its associated report are timely: In 2023, the Victorian Government announced the retirement and transformation of all public housing towers across Victoria. Community input into the redevelopment process is crucial.

The Better Start report (to be released in 2024) outlines recommendations for immediate and future improvements to address the concerns of families and ensure the redevelopment of public housing towers provides safer living environments.

Recommendations for immediate improvements include:

- enhancing security and safety measures, including installation of security cameras, improved lighting, controlled entry systems, and increased on-site safe disposal syringe bins
- allocating resources for child and family initiatives, offering activities and childcare at community events, and ensuring all community spaces are child-friendly
- focusing on building maintenance, addressing hygiene, fire safety, alarm systems, and improving systems for reporting maintenance issues.

Recommendations for future improvements include:

- incorporating gender-sensitive design in public housing development, prioritising safety and quality housing for women and children
- implementing place-based initiatives that focus on building collaborative partnerships with residents and co-locating services for a prevention-first approach to health
- working in partnership with families by implementing a trauma-informed ‘whole-of-family’ approach and engaging parents as partners in the codesign and co-production of services.



“The Better Start project highlighted the value of working with community and supporting their capacity to advocate for change.”

**Jennette Coffey,
Better Health Network**



Education, health and social care working together



Supporting children and families to access high-quality services when and where they need them: Restacking the Odds

RESTACKING THE ODDS

The need

Participation in quality early childhood services helps to ensure children are on the right path to fulfill their potential. But when services are underused, unavailable or vary in quality, they can't fully meet the needs of children or families. While there is no single simple solution to the complex challenges that some children and families experience, focusing on ensuring equitable service participation, quality and accessibility can help optimise child health, development and wellbeing.

Our response

Restacking the Odds (RSTO) is a project that aims to ensure children and families can access a combination of high-quality, evidence-informed services where and when they need them. By focusing on the early years and supporting services to better meet the needs of children and families, RSTO helps to create the conditions that enable all children to thrive.






The RSTO approach fuels collaboration and learning to accelerate improvement in early childhood services.

RSTO takes a unique evidence-informed approach that focuses on how to work differently for better outcomes for children, families and communities. It develops the skills and knowledge of RSTO partners for collecting, understanding and using data on service accessibility, quality and participation. RSTO provides a framework of lead indicators along with tools, resources, and opportunities for learning and skill development that build capacity for evidence-informed decision making.

The RSTO approach enables partners to:

- ensure their service is driven by evidence of what works
- better respond to the needs of children and families experiencing vulnerability and disadvantage
 - be innovators in service design and delivery
 - provide more effective and efficient services (and avoid wasting time, money and effort on approaches that fail to deliver results)
 - learn and share with others striving to improve children's outcomes
 - capture evidence for insights, innovation and advocacy.

FOCUSING ON FIVE KEY EARLY CHILDHOOD SERVICES

				
Antenatal care	Sustained nurse home visiting	Early childhood education and care	Parenting programs	Early years of school (years P-3)

RSTO focuses on five services that together boost children's health development and wellbeing: antenatal care, sustained nurse home visiting, early childhood education and care, parenting programs and the early years of school.

The benefits

RSTO has focused efforts across advocacy, research and implementation to help drive meaningful change in early years service provision in various communities. The project has successfully raised awareness of the importance of 'stacking' key services across the early years. The concept of 'stacking' and the use of lead indicators were included as key recommendations in South Australia's Royal Commission into Early Childhood Education and Care.

RSTO has also been working closely with its service and community partners to codesign an easy-to-use program, which includes a data platform, and a continuous improvement program, to help build the capabilities of practitioners to collect, understand and use quality, quantity and participation data to improve outcomes.

Early trials of the RSTO program with two Gowrie Victoria early childhood education and care centres have successfully enabled these services to track participation, and experiment with activities to improve their service performance. Activities implemented to improve participation include:

- raising families' awareness of the importance of early learning and consistent ECEC attendance
- developing a campaign to improve families' knowledge of what play-based learning is and how it can help their child achieve positive outcomes through consistent attendance
- changing where the Gowrie sign-in facility is to ensure families can see it and access it as they arrive
- supporting transport for families who have difficulty attending due to transport issues.

Looking forward, RSTO will seek to strengthen its engagement and implementation resources to continue to support current partners and to be able to expand support to enable other services and communities to 'stack' key early years services and programs.

"It has been a privilege to partner with communities, service providers and governments across Australia as we put RSTO research and learnings into action. We are excited by the early-stage progress we have made in supporting service providers and communities to use data and evidence in practical ways, to improve equitable service delivery for children and families."

Olivia Hilton, CCCH



"At Logan Together, we believe the work we are undertaking with RSTO is invaluable. The RSTO framework itself provided both the insights and the credibility we needed to efficiently structure the priorities of community in the development of our reimagined Early Childhood System ... a focus on leading indicators at the service level has already enabled the establishment of an increasingly robust and aligned quality improvement practice."

Michelle Lucas, Logan Together



Victorian Centre of Health Leadership for Children in Care

The need

Identifying and addressing the complex health needs of children in care is an important, specialised, but relatively new field of work within the child and family services sector and paediatric healthcare in Victoria and Australia. In addition to skills in developmental paediatrics, it requires an understanding of the Child Protection system and the challenges facing kinship and foster carers in accessing healthcare. The impact of trauma upon children's health and development necessitates a trauma-informed approach to care.

Given the state responsibility for this group of children, it is imperative that all children who are in care receive high-quality comprehensive assessment of health needs, with recommendations documented in Health Management Plans that are clear and accessible, and that these recommendations are implemented. State-wide consistency of practice is important for equity, but also because of the mobility of some of the children in care, who move placements and therefore need to change healthcare providers. A state-wide rollout of multidisciplinary health assessment teams and clinical navigator roles has commenced in 2024.

Our response

The newly established Victorian Centre of Health Leadership for Children in Care will support the new workforce across the state in multidisciplinary teams and clinical navigator roles through workforce development, capacity building, leadership of quality improvement and strengthening connections to streamline access to care.

Based at The Royal Children's Hospital in the Centre for Community Child Health, the Centre of Health Leadership for Children in Care will include both medical and nursing lead clinicians. This team will support the Department of Health roll-out and state-wide expansion of both multidisciplinary assessment teams and clinical navigator roles through a range of activities: capacity building and training; quality improvement and assurance; and connecting and expanding care.

Capacity building and training

- Workforce development through training clinics and regular training events
- Communities of Practice for assessment clinicians and clinical navigators



Quality improvement and assurance

- Leading consistency of care - through common training, use of electronic medical records, professional development
- Supporting monitoring through co-design of indicators



Connecting and expanding care

- Electronic medical record upgrade
- Streamlining access to subspecialty care



“It is wonderful to be able to play a role in the state-wide rollout, and help ensure that children and young people entering care all across Victoria have the same chance to have their health needs assessed and addressed. We are really looking forward to supporting and learning from one another as the workforce is established and develops.”

Dr Karen McLean, CCCH

The benefits

The Centre for Community Child Health has the necessary expertise to coordinate the Victorian Centre of Health Leadership for Children in Care through its 10-year implementation of the Pathway to Good Health multi-disciplinary assessment clinic. This has included the provision of professional development for paediatricians and a training clinic for senior paediatric trainees – ensuring that the paediatric workforce going out into the community is better trained to look after these children. Nurses within our department have been seconded into Child Protection teams for almost five years, successfully piloting the roles that have preceded the clinical navigator roles.

Providing clinical leadership within the Centre of Health Leadership for Children in Care complements the clinical, training, research and policy work already being undertaken by the Centre for Community Child Health within this space. It will provide an opportunity for all clinicians in this space to learn from and support one another, as they provide a more equitable and connected service to children and young people who often move across the state when placements change.

Ultimately, addressing the complex health needs of children in care – through capacity building, quality improvement and extending connections to care – is crucial for ensuring their health, development and wellbeing.

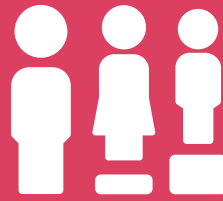


“When children enter out of home care, with the new rollout of health navigators statewide we are presented with an opportunity to achieve equity in access to health care and the improvement of health and wellbeing outcomes for vulnerable children. We are committed to achieving positive health outcomes as we support this rollout.”

Alice Cookson, CCCH



Equitable services



Addressing early childhood inequities: Changing Children's Chances

The need

Reducing disadvantage in early childhood would have immediate and lasting benefits for children, families and communities. It is projected that redressing disadvantage in the early years could reduce socio-emotional problems by up to 59%, physical functioning problems by 49% and learning problems by 55%.

There are many existing policies and services across education, health and social care portfolios that can help children and families to thrive. However, no single intervention alone is sufficient for tackling inequities.

Our response

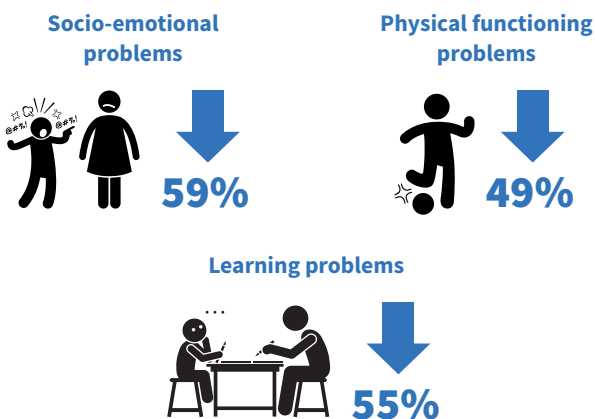
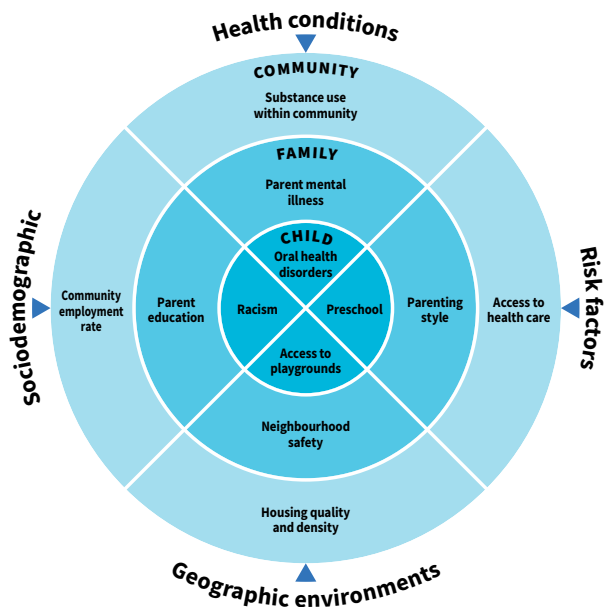
The Changing Children's Chances (CCC) project objective is to deliver robust evidence to inform more effective and precise policy decisions, with the aim to increase equity in child health, development and wellbeing within a generation.

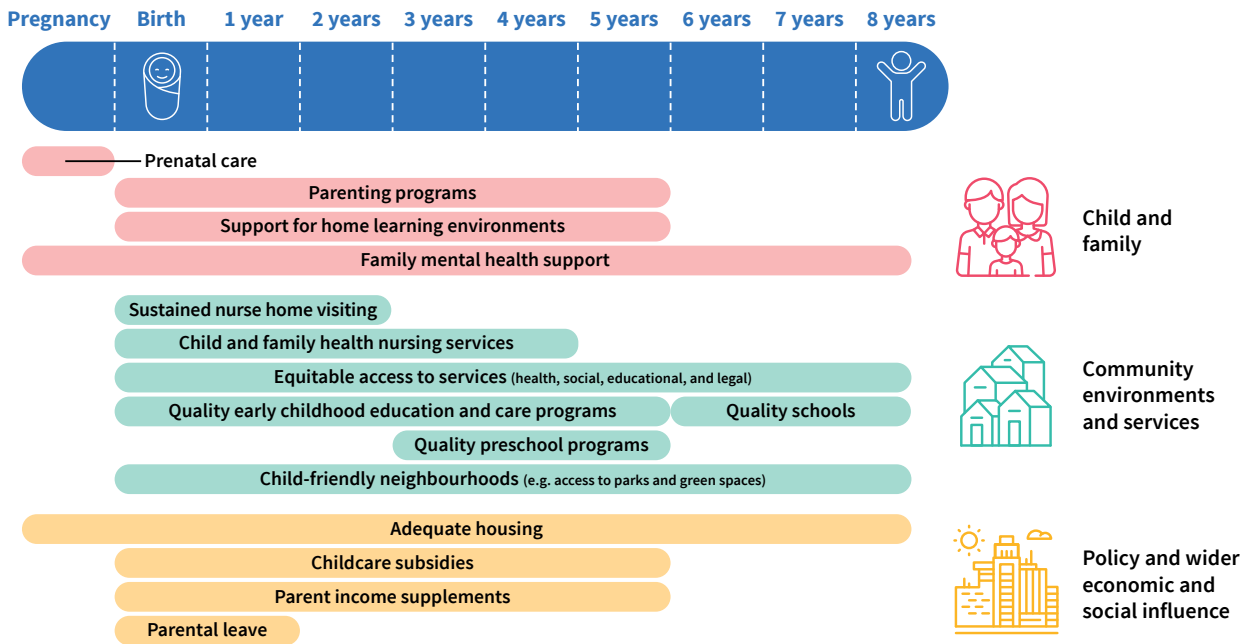
Phase One of the CCC project (2016-2020) described the complex circumstances in which children are born, live, learn and grow – known as social determinants. These social determinants shape children's health, wellbeing and development. A framework was developed for understanding the four key social determinants that contribute to inequities in children's health, development and wellbeing.



“It is fantastic to be working collaboratively with our Knowledge Translation Reference Group as it helps us to deliver evidence that is key to decision making.”

Dr Elodie O'Connor, CCCH





Phase Two of the project (2021-2024) extends on this foundation. This phase of the research aims to better understand policy opportunities for reducing inequities in children’s mental health, physical health and academic achievement. CCC researchers use innovative analytic approaches with existing data sources – including the Longitudinal Study of Australian Children and the Person Level Integrated Data Asset. They are modelling how combining or ‘stacking’ interventions can reduce inequities – particularly for those experiencing the greatest vulnerability or disadvantage. Action can be taken at the family, community and policy level. The CCC project proposes that simultaneous action at all three levels can best optimise children’s health and development.

The benefits

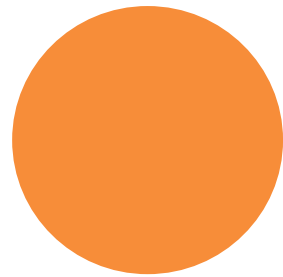
By evaluating different ‘what if’ policy intervention scenarios, the CCC project can rapidly and cost-effectively generate new evidence to inform future real-world interventions and policy decision making.

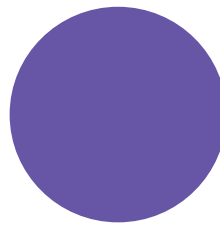
The team also works collaboratively with a Knowledge Translation Reference Group, made up of policy experts from Australian state and federal governments and non-government organisations. This helps to ensure that investigations are relevant and accessible to decision makers.

By helping decision makers understand which combinations of interventions are beneficial, CCC findings can help to direct limited public funds towards opportunities that will have the greatest impact. This can inform more effective and precise policies to reduce inequities in children’s health and development.

“The CCC project is a wonderful example of how existing data sources can be leveraged to inform more precise policy decision making and ultimately improve equity in children’s health, development and wellbeing.”

Dr Sarah Gray, CCCH



Reducing money worries to improve caregiving, and health and wellbeing: Healthier Wealthier Families



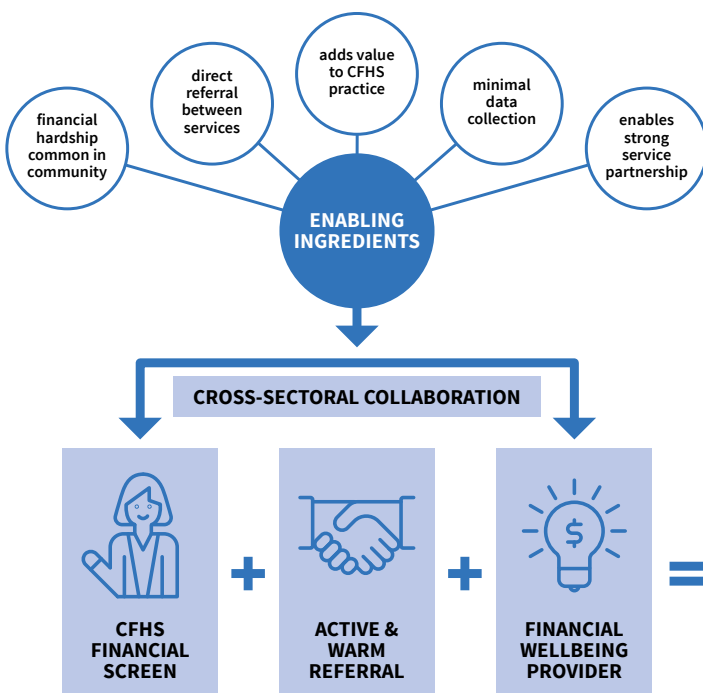
The need

In Australia, the cost of living is a major challenge. At least one in three families with young children cannot afford essentials such as food, housing or healthcare. Parents who experience financial hardship report triple the levels of poor mental health (36% vs 11%). This can affect parenting, the child-parent relationship, and the home learning environment. Strengthening the financial security of families can enhance the environments that help children to thrive.

Financial wellbeing services are funded by state and federal governments, and freely available in the community. They are designed to help clients access services and entitlements, and support those experiencing financial hardship and distress. However, often the families most in need of these services are not aware of or able to access them.

Our response

Healthier Wealthier Families (HWF) works to connect financial wellbeing services with the community-based Child and Family Health Nursing Services (CFHS, also known as CaFHS, CHaPS, and Maternal and Child Health). HWF is an early intervention model whereby CFHS practitioners start asking families about experiences commonly related to financial hardship. This includes whether they have been able to afford essential items in the last month (such as food, rent/mortgage payments, healthcare), or if they have been out of paid work. By identifying financial challenges early, HWF works to improve economic and wellbeing outcomes for families, and benefit parenting, child-parent relationships and the home environment.



“It is very good that women like me will be aware that you can raise your voice and there is help ... No matter what situation you are in, there is help.”

HWF participant

The Australian HWF model is an adaptation of a successful model funded by the Scottish Government and implemented in Glasgow. By 2020, 10 years after it began, the Scottish model had generated over 26,000 referrals and over £36 million in financial gain for families and is now cited as a requirement of Scotland's Child Poverty Action Plan for families of young children.

The Australian model was developed and pilot tested for feasibility and acceptability in sites across metropolitan and regional Victoria and New South Wales in 2020-22. A feasible model was developed in a diverse, outer-metropolitan area of Victoria. Here, two-thirds of clients experiencing financial hardship engaged with the financial counsellor (44 caregivers in total). Common challenges were utility debts (73%) and obtaining entitlements (43%), and material aid or emergency relief (27%).

The benefits

Financial counselling through HWF helped caregivers increase income from government entitlements by an average of \$6,504 annually (\$125 p/week) plus \$784 from other sources such as concessions, grants, brokerage, and debt waivers. Caregivers described benefits including reduced stress, practical help, increased knowledge, and empowerment.

The Australian model is also being implemented by collaborators in Sweden and England – showing its value across international settings.

To reduce financial hardship for more families, we need to understand the benefits of HWF at scale. Implementing and evaluating HWF with more communities will show how the partnership between health and social sectors can improve the financial and mental health experiences of Australian families with young children. Analysis of the benefits, costs and implementation of HWF will also contribute to building understanding of scaling and adaptation for other services, such as antenatal support and early education.

By connecting families to financial wellbeing services, Healthier Wealthier Families reduced family stress, improved knowledge and increased annual income by an average of \$6,504.

“HWF was a truly innovative project that helped test how joining up services can work for the benefit of children and families. It was a really exciting project to work on and I look forward to seeing how it can be tested further.”

**Natalie White,
CCCH**



“The challenge for the Australian health system is that the adverse social conditions that drive health, such as financial hardship, sit outside the sector. HWF is a potential solution for addressing financial hardship and its negative impacts on families - and during early childhood, when household income drops and children’s brains are developing more rapidly than any other period.”

Dr Anna Price, CCCH



Public policy and practice reform

For 30 years, the Centre for Community Child Health has been using evidence to drive policy and practice change to help shape a better future for Australian children, families and communities. Over the last 5 years, we have increased our efforts to influence public policy and practice reform using a number of key strategies.

Researchers in Residence

The Researcher in Residence (RIR) program aims to make evidence available and actionable in community organisations to inform service model design and practice. The program also seeks to generate evidence about what works in these organisations to engage and support children and families, particularly those experiencing adversity and disadvantage.

The RIR program focuses on collaboration, active participation of stakeholders, and a commitment to shared learning. The researchers in these roles will also help to build a learning system and culture in these organisations, supporting them to continue to be responsive to the needs of children and families.

Presently, the Centre has four Researchers in Residence working across three programs of work:

Optimising Child and Family Hubs

In partnership with the Brian M Charitable Foundation, Sunraysia Community Health Service, IPC Health and DPV Health, the Centre has embedded two researchers across these three Victorian Community Health Services. The program will support the development and growth of Child and Family Hub models that integrate child and family health and social support services to better address the difficulties facing children and families.

Strengthening place-based approaches

The Centre's partnership with Key Assets Australia (KAA) enables a researcher to be embedded within KAA to support the organisation's place-based and early intervention work.

The Researcher in Residence and KAA staff will work together to mobilise evidence to strengthen the design and delivery of efforts to support children and families in the community. This includes the use of place-based approaches, such as community engagement, codesign and co-delivery, and the application of evidence-based integrated service models and their elements.

Partnering with government to develop equitable universal services

In a partnership with the South Australian Office for the Early Years in the Department for Education, a Researcher in Residence is supporting evidence-informed decision making in universal service provision. To date, this has included working with the teams responding to the Royal Commission into Early Childhood Education and Care (2023) and the implementation of the state's Early Learning Strategy (2021-31).

Thriving Children, Thriving Communities webinar series

Our Thriving Children, Thriving Communities webinars are designed to unite clinicians, researchers, practitioners, policymakers and community members and explore issues of significance relevant to children's health, development and wellbeing. We focus on bringing together diverse early childhood perspectives, sharing evidence and resources, and exploring equity and innovation in relation to community child health.

More than 600 early childhood professionals on average register for each seminar.

Recent webinars include:

- A vision for a better system: the role of Child and Family Hubs
- Combatting child poverty in Australia: What are the challenges and how can we overcome them?
- Ensuring healthcare in out-of-home care: Identifying and responding to the health needs of children and young people

Submissions

Our public submissions to government inquiries outline key issues affecting children and families and offer clear evidence-informed solutions. Each submission emphasises prevention, early intervention and redressing inequity to deliver the greatest benefits to children now and into the future.

Most recently, we have made submissions in response to The Early Years Strategy Discussion Paper, the South Australian Royal Commission into Early Childhood Education and Care, the Senate Inquiry into School Refusal, the Senate Inquiry into Poverty, and the Productivity Commission's Review of the National School Reform Agreement.

We have been encouraged to see key recommendations from our submissions and references to our research initiatives cited on numerous occasions throughout the inquiry reports, underscoring the impact of our contributions to policy reform and decision making.

“Our submission recognises that the conditions in which a child is born and grows have significant impacts on their lifelong health, development, wellbeing, and educational outcomes. Poverty is a fundamental social determinant of child and family health and development, which can cause lifelong and intergenerational harm.”

CCCH submission to the Senate Inquiry into the extent and nature of poverty in Australia

Translating evidence into impact

The Centre has a rich history of establishing strong partnerships and translating evidence into impactful initiatives, leading to real-life improvements in children's health, development and wellbeing. Here, we highlight just some of our initiatives that demonstrate the full research-to-impact spectrum.



Victorian Infant Hearing Screening Program

Celebrating 20 years of screening Victorian newborns, VIHSP has reduced the median age for detecting congenital permanent bilateral hearing loss from 21 months to less than one month.



Raising Children Network

Pioneering a world-leading initiative to enhance the health literacy, skills, confidence, and agency of parents and carers through education and digital technology, the Raising Children Network platform attracts over 84,000 daily users.



Sleep with Kip

An innovative, clinically validated, and evidence-based children's storybook series, Sleep with Kip employs creative adventures to teach children about healthy sleep habits. It has sold over 20,000 books and audiobooks.

COVID-19 Kids Resource Hub

COVID-19 Kids Resource Hub

Bringing together the latest research and evidence-based resources on COVID-19 and children, the Resource Hub includes infographics, videos, podcasts, training, guides, and research briefs.



National Child and Family Hubs Network

The 2023 launch of the National Child and Family Hubs Network has established a coordinated coalition of organisations dedicated to optimising Child and Family Hubs to enhance the wellbeing of Australian children, families, and communities through evidence-based practices.



Mental Health in Primary Schools

Pairing a Mental Health and Wellbeing Coordinator with a world-class evidence-based training program, MHiPS aims to enhance the capacity of primary schools to support student mental health and wellbeing. MHiPS is set to expand to every government and low-fee non-government primary school in Victoria by 2026.







If you would like to learn more about our work or are interested in partnering with us on our journey, please contact enquiries.ccch@rch.org.au

We would like to acknowledge the following staff for their contribution to this publication and the Centre's 30th anniversary event: Vikki Leone, Sarah Davies, Jayne Ballingall, Megan Keyes, Nicole Murphy, and Tess Devine-Hercus.

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YEARS

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The Centre for Community Child Health acknowledges the Traditional Owners of the land on which we work and pay our respect to Elders past, present and emerging.

The Centre for Community Child Health is a department of The Royal Children's Hospital and a research group of the Murdoch Children's Research Institute.



The Royal **Children's**
Hospital Melbourne