



GROWING TOGETHER MODEL

DARTMOUTH - NOVA SCOTIA

DESCRIPTION

GROWING TOGETHER IS an umbrella project of the Dartmouth Family Resource Centre (DFRC). The project provides health promotion, prevention, and early intervention services for all children from 0-6 years of age and their families living in the Dartmouth North community. The Dartmouth North community is characterized by a high density population with 35% of Dartmouth children aged 0-4 years and 33% of children aged 10-24 years living in this Dartmouth North DFRC community. The Growing Together Project compliments the existing programs offered by the DFRC and works in cooperation with staff and parents of the Centre. The DFRC is committed to working with the community to strengthen and build the capacities of its families and the community as a whole. The Centre's mission is to provide social support, education, and promote a nurturing and enabling community environment in order to enhance the well-being of children ages 0-6 years and their families who are at an increased risk in today's society.

STRATEGIES: The Growing Together project provides Dartmouth North with: universal home visitation, early family assessment and infant/child monitoring services, a modified and expanded well-baby/developmental drop-in and clinic, expanded prenatal/postnatal education and support services for families. In addition, Growing Together offers: child-centred programs, parent-child programs, family support programs and community development involvement under the umbrella of services and programs offered by DFRC and other community groups. Through a collaborative and transdisciplinary approach, the Growing Together team is able to provide individualized family support and intervention services by way of a family plan. The family plan takes into account families strengths and challenges as well as provides the opportunity for the families to take a lead role in the planning.

APPROACH: Growing Together in Dartmouth North is committed to programs and services that:

- provide a range of interventions recognizing that child development is influenced by multiple factors that interact as parts of a whole
- Begin intervention early in life- i.e., initiate programs during prenatal period.
- Provide long-term services.
- Encourage intensive participation - i.e., programs “work with” rather than “do to” participants
- Target both parent and child
- Include high-quality providers (specific preparation to the task)-i.e., both lay and professional providers have specific roles and targeted training.

The Growing Together project in Dartmouth North is committed to working with the community to strengthen and build the capacities of its families and the community as a whole. Programs and services are provided in a seamless manner whereby families can avail of any combination of supports that are best tailored to meet their needs and build on their strengths.



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ESSENTIAL PROGRAM COMPONENTS

Early Screening of Mothers and Newborns All new mothers are phoned and offered a visit by both a Community Home Visitor and Public Health Nurse (postnatal guarantee). Although no formal tool to measure risk is being used at this time, informal observations of and dialogue with families during Well Baby Clinic and Baby Club and during home visits provide us with opportunities for informal risk factor assessments. New birth notices are obtained from Public Health, the IWK Maternal and Newborn Unit, self-referral through Welcome Wagon notices and community notices.

Ongoing and Regular Monitoring, Assessment, and when Necessary, Referral to Services Ongoing monitoring will occur through the Ages and Stages Questionnaire (ASQ) which we are just beginning. Areas of developmental concern as identified through the ASQ will be further investigated and assessed through the Bailey's Developmental Scale (Developmental Psychologist) or through formal speech-language assessment (Speech Language Pathologist). Referral to outside services will be made as required. The information obtained from assessment will be used in a collaborative team approach to provide the family with appropriate support and services i.e., family plan.

All families visited by the Community Home Visitor after the birth of a child will receive follow-up calls within a month of the initial visit as a way of staying connected and further promoting programs and services. Baby Club drop-in provides another opportunity to informally monitor early child development on a weekly basis.

Child Centred Programs includes:

Sunshine Gang: A summer recreational and learning program for children between ages 3 and 5.

Preschool: A school readiness program for children entering school the following year with an increased emphasis on language and cognitive development.

Child Development Programs: Provides children with opportunities to engage in child directed and developmentally appropriate activities aimed at promoting: social, emotional, cognitive, and physical development.

Opportunities exist for Growing Together Staff to work with children and families on specific developmental goals in these settings if required.

Parent-Child Centred Programs includes:

Dad-n-Tot: A playgroup for fathers and their child(ren), which takes place in the evenings to accommodate working dads.

Parent-n-Tot: A parent and child interactive program for families of children 0-18 months. It focuses on using rhymes, songs, and stories in interactions with the children.

Baby Talk: A program for parents and their new babies aged 0-6 months. Topics covered include: attachment, infant communication, behaviour, cues, feeding, sleeping/waking, and effective ways for parents to respond.

Play Shop: Using a theme-based approach, Child Development workers offer a program which encourages parent-child interaction.

You Make the Difference: Promotes ways in which parents can facilitate their child's language development and learning through the ordinary conversations of everyday living.

Family Support services include:

Systematic Training for Effective Parenting (STEP): A 10 week program which provides parents with developmentally appropriate ways to understand and respond to children's behaviour.

Nobody's Perfect: Parents explore issues around their children's safety, development, and behaviour.

Self Esteem: A program that explores issues around self esteem, and ways to foster personal self esteem.

The Cupboard: Provides families with an opportunity to barter and trade goods with each other and give back to the community.

Postpartum Support Group: Provide an opportunity for new moms to network with each other and explore postpartum emotional issues with a trained professional.

Coffee Talk: An opportunity for families to receive respite and participate in social networking with peers. Staff are available at parents' request.

Craft: Parent facilitators plan, prepare, and present crafts for parents to complete.

Creative Cooking: A program that provides an opportunity for families to get together and cook in bulk to divide and share. Parents learn through practice, to plan, shop for and prepare a menu, then divide it accordingly to family size.

Coffee House: An informal evening for parents and caregivers to experience and/or participate in poetry readings, author readings, music, etc., while in a Coffee House setting, that is otherwise not available in our Community.

Community Development activities to enhance the community surrounding our program include:

Craft Committee: An opportunity for community members to oversee the planning and direction of the Craft Program.

Leadership Training: Community members have the opportunity to participate in leadership positions. A training protocol has been developed to provide parents with the skills and capacity to facilitate programs and participate in other leadership roles at DFRC.

Community and Play Ground Cleaning (Mural): Community members have the opportunity to come together and contribute to the beautification of our neighbourhood.

Food Costing Project: provincial project aimed at examining equitable food costing in low income neighbourhoods. Members of our Community and some staff will be participating in this study.

Holding Ground Presentation: Community members will participate in presentations and discussions around community capacity building and community development (hosted by DRFC and other Community agencies).

Social and Cultural Awareness Committee: A committee consisting of staff and parents which aims to promote social and cultural awareness in all DFRC activities.

Community Outcomes Tracking (Metro United Way): In partnership with the Metro United Way, the DFRC will hold conversations with community members to identify what indicators the community is interested in tracking so that they know how their neighbourhood supports healthy childhood development.

Stop Smoking Program: A program for staff and parents to support one another in quitting smoking.



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FEATURES

SITES AND SERVICES

LOCATION: Many families in Dartmouth North are living in difficult circumstances characterized by poverty, poor housing, and limited education levels. Dartmouth North has one of the highest birth rates in the province. Data from the Province's Department of Community Services (Family and Children's Services) show that this area has a significantly higher incidence of child abuse. Reports from the police suggest that the rate of crime is higher than elsewhere. School personnel have voiced concern that children are not adequately prepared for school entry.

FOCUS: (families with pregnant mothers, infants and young children) Programs are created for families when the mother first learns she is pregnant, and families with infants and young children up to the age of six.

ACCESS: Within the Dartmouth North catchment area programs and services are offered to all families with young children.

ACCESSIBILITY: (time, location, transportation, child care) Most programs take place at consistent times in the day, (i.e. 9:30-11:30 or 1:30-3:30) to ensure less confusion for families around program times. Some evening programs take place to accommodate families who are not able to make daytime programs. Programs take place primarily at the DFRC, however some programs take place at the Dartmouth North Community Centre to improve accessibility and visibility. The DFRC provides bus tickets for families to attend programming and also provides child care for families while participating in programs.

SERVICES: The following represents a list of partners instrumental in providing the essential program components:

- IWK Health Centre (provision of Developmental Psychologist for 2 half days per week).
- Public Health Services (Public Health Nurse)
- DFRC Staff (Speech-Language Pathologist, Early Childhood Educators, Community Home Visitors, Administrative Assistant, Executive Director, Program/Evaluation Assistant)
- Dartmouth Boys' and Girls' Club (Preschool Program)
- Social Worker (Dept. Of Community Services)

Agencies to network with that also provide early intervention services:

- The Progress Centre for Early Intervention
- The Nova Scotia Hospital's Mental Health Outpatient Services
- Dartmouth Developmental Centre

- Nova Scotia and Hearing and Speech Clinic
- Drug Dependency Services
- Dalhousie University
- Child Protection Services (Dept. Of Community Services)
- IWK Developmental Clinic

FUNDERS: Major funders include:

- Health Canada, CAP-C
- Lawson Foundation
- Invest-in-Kids Foundation
- Provincial Department of Community Services
- Provincial Department of Health
- IWK Health Centre
- Metro United Way
- Royal Bank of Canada

Additional Funders (Including In-kind Support)

- Capital District Health Authority
- Human Resources Development Canada
- Various businesses, service clubs, etc.
- Mt. Saint Vincent University
- Dalhousie University
- Unilever Canada

OUTREACH: One of Growing Together's essential services is the offer of a celebratory visit by our Community Home Visitors to each family of a newborn in Dartmouth North. Subsequent follow-up calls and visits are made to the new parents. The Community Home Visitor role is to assist families to celebrate family, strengthen confidence, promote satisfaction, promote access to community and its resources, and to reduce isolation. The types of support they offer include information and advice, emotional support and encouragement, material goods and physical assistance. The purpose of this support is to promote social comparison, validation and normalization, exchange and learning of coping strategies and resources through peer problem solving. The Community Home Visitor Role is filled by women from the community who share similar life experiences as the families they visit and have direct knowledge of, and passion for, the types of programs and supports offered at the Centre.

ADAPTATION: Home visiting by the Developmental Psychologist and the Speech and Language Pathologist are made as a way of reaching families with children who have developmental concerns or who are at risk for developmental delay. The Growing Together team has also established a process to enhance our linkages with Community Services and the Child Protection Unit in order to best support those families who are involved in Child Welfare cases.

Parenting programs are adapted by the Community Home Visitors in order that they can bring parenting programs into the homes of families who are not regularly attending the Centre, yet who are in high need of parenting support.

PARENT PARTICIPATION: Parents have meaningful and significant roles in the design and implementation of the Growing Together model at DFRC. Parents sit on the DFRC Board and there is a

Parent Advisory Committee which provides staff with programming ideas and suggestions, provides feedback on programming and facilitates community awareness and involvement. The Growing Together site committee has two parent representatives who help assure that the design of the Growing Together model reflects the needs, wishes, and resources of the community. Parents are also involved as program facilitators and centre facilitators. They also provide direct input into programming by attending coordinators meetings for DFRC planning. Focus groups with community members occur periodically as a way to get feedback and input into programs and services.

QUALITY: Statistics are collected on program attendance and family activity at the DFRC. Feedback sheets are distributed to families who participate in programs and services. Periodic focus groups take place to get input and feedback from families. Regular staff development days are held to ensure ongoing training and that best practices are reviewed. Biweekly staff meetings take place as well as biweekly Growing Together team meetings. Informal feedback from the community is valued and integrated when possible into the Growing Together model.

EVALUATION: The DFRC is in the process of setting up a IMS so that we may input all of the data that we have been collecting for the Growing Together project including:

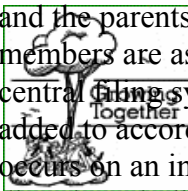
- Community Home Visitor Statistics
- Program Attendance
- Family Activities
- Assessments or Monitoring
- Ages and Stages Data
- Family Plan Information
- Information obtained from questionnaires
- Family demographic information

TEAM FUNCTIONING

SERVICE PROVIDERS: Transdisciplinary The Growing Together team uses a systematic process for sharing roles and crossing disciplinary boundaries to maximize communication, interaction, and cooperation between members. Team members consist of Psychologist, Public Health Nurse, Community Home Visitors, Speech Language Pathologist, Social Worker, Early Childhood Educators, Administrative Assistant, Program and Evaluation Support Staff, and Executive Director. Members have made a commitment to teach, learn, and work together across disciplinary boundaries to implement coordinated services. Parents are full active team members and can coordinate services if they chose to.

PROFESSIONAL RELATIONSHIPS: Training for the team is ongoing and occurs during regular professional development days. Case conferences take place during regular Growing Together team meetings or during meetings scheduled throughout the week. Team members also participate in training workshops outside of DFRC when it is relevant to the Growing Together mandate. Students from our local universities in fields such as: social work, nursing, early childhood development, speech and language pathology, and nutrition do regular placements within the DFRC.

RELATIONSHIPS: Team members and family conduct a comprehensive developmental assessment together, with parents as full, active and participating members of the team. Team members



and the parents develop a family plan based upon family priorities, needs, and resources. Specific team members are assigned to implement the plan with the family. To reflect the coordinated service, a central filing system exists where all information pertinent to a particular family is kept in one file and added to accordingly by team members as they interact with the family. Debriefing by team members occurs on an informal basis outside of case conferences, when appropriate. All team members, either directly or indirectly involved with family, are involved in the planning and implementation to ensure a holistic approach.

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PRINCIPLES

CHILD DEVELOPMENT FOCUS: The goal of Growing Together, Dartmouth North is to improve the health, well-being, and development of infants and young children from 0-6 years of age in the catchment area of Dartmouth North. The project recognizes that during the early years, healthy child development is influenced by a number of interacting factors, the most critical of which is the parent/caregiver. Therefore, programs and services directly address child development areas, as well as those areas important to parents and caregivers that are thought to affect the child.

ECOLOGICAL OR TRANSACTIONAL: The theoretical stance of the Growing Together Dartmouth North model recognizes that multiple factors contribute to children's development. This approach recognizes that parental support is critical and that some of the problems families face are of a systemic nature requiring intervention at the community level. Intervention can occur by mobilizing group and community resources and by advocating for a variety of measures and services that contribute to the development of safe and sustainable communities. Factors thought to have an influence on healthy child development include the family's: income and social status, social support networks, education, employment and working conditions, physical and social environments, personal health practices and coping skills, health services, and culture.

RESPECTABLE, TRUSTING, CARING: The Growing Together Dartmouth North (GTDN) model reflects respect, trust, and caring for all involved by:

- valuing the knowledge and skills that community members bring to the project
- welcoming families in a warm open non-threatening way
- supporting without judgement
- providing a physical environment which is comfortable for all ages and developmentally appropriate
- ensuring that staff and volunteers interact with children, parents, and families and with each other in a welcoming, caring, and respectful manner
- ensuring that the content of the programs are respectful of and responsive to the needs of participants
- using language that focuses on strengths and skills rather than deficits and weaknesses

FLEXIBLE, CULTURALLY APPROPRIATE AND SENSITIVE SERVICES:

GTDN provides services and programs that are sensitive to the diverse needs of individuals, families, and the community. The project responds to the needs through the:

- type, duration and content of the activities offered
- formal and informal training opportunities available
- policies developed and procedures followed
- working relationships established

Specifically, the project demonstrates sensitivity to and respect for differences by putting in place and adhering to an anti-discriminatory policy and process, using language and processes in recruitment, programming and management practices that are respectful and inclusive and applying policies and practices equitably to all people.

CONSIDERATION OF STRENGTHS AND PROTECTIVE FACTORS: We

recognize that individuals come to our program with different strengths, goals, and capacities, and that strengths should be recognized and nurtured as a way to focus on healthy child development goals. Strengths and capacities are identified and are used as a foundation to work with the families in setting goals to meet the needs and the challenges that they face.

SEAMLESS SERVICES: Families involved in GTDN are provided with unhindered access to community resources, professional services, and social supports. Support and services are provided in natural settings including: the family home, DFRC, Preschools, schools, etc. In this way, programs become integrated into families' daily lives. Service providers work in a coordinated and collaborative manner so that families are provided with an array of services, hence avoiding duplication, enhancing existing services, smoothing movement between existing services, and meaningful use of existing resources.

PROFESSIONALISM: Staff development days occur on an ongoing basis. Training from outside facilitators from Dalhousie University, Community Services, and in-house staff takes place to enhance our work. Team meetings occur on a weekly basis where family plans, best practices, and communication amongst staff and participants are highlighted.

PARENT AND COMMUNITY LEADER PARTICIPATION: Parents, families, and communities participate fully in all aspects of the model (planning, developing and evaluating programs and DFRC's management) as they know best what will work in their community. DFRC understands that the community, which it serves, must form the Centre's evolution, including the direction of GTDN. Specifically, the Growing Together Advisory Committee which is comprised of community members works with DFRC and project staff to assure that the design and implementation of Growing Together Nova Scotia :

- reflects the needs, wishes and resources of the community
- adheres to the philosophy and mission of DFRC
- contributes to shaping the program guidelines set forth by the DFRC, the Provincial Advisory Group, Invest In Kids, and other partners.

HIGH QUALITY: All staff and volunteers require extensive orientation, and on-going training around the GTDN program (e.g., philosophical underpinnings, programs and services); individual roles, responsibilities, and team concepts; and use of materials (e.g., administering assessment and monitoring instruments), etc. Some of the training material (e.g., home visitation program) will come through Invest in Kids. Where necessary appropriate resources will be used to assist with training needs assessment, development of materials and delivery of training. In order to be most effective, it is recognized that staff and volunteers will need to pay particular and on-going attention to building a strong, cohesive team. To this end, regular training and team-building opportunities will be developed for all those who provide services through Growing Together.

The DFRC Board is committed to ensuring that pay equity and appropriate compensation occurs for all staff.

Feedback from the community and the GTDN team around the programs and services are continually monitored and integrated in planning and implementation.