Kowanyama Community Playgroup Project

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Introduction

The Royal Flying Doctor Service of Australia (RFDS) was established by the Reverend John Flynn in Cloncurry, Queensland in 1928.

The Service is a national, not-for-profit organisation consisting of four operational sections: Queensland, South-Eastern, Central and Western Operations. Each section functions autonomously with the oversight from the national body, The Australian Council of the Royal Flying Doctor Service.

RFDS Queensland Section

Today there are 23 RFDS bases across Australia, with eight being in Queensland.

The eight bases are located in Mt Isa, Charleville, Rockhampton, Cairns, Longreach, Townsville, Bundaberg and Brisbane. The RFDS Queensland section employs 171 full time (FT) and part time (PT) staff, including 21 FT and 6 PT Medical Officers, 34 FT and 7 PT Nurses, 14 FT and 4 PT Allied Health and 36 Pilots.

Services provided include both primary health care clinics and aero medical retrievals. Queensland RFDS operates a fleet of ten aircraft, three located in Cairns, two in Mt Isa and one at each of the remaining bases. Longreach base is exclusively a land based mental health service.

The Charleville, Mt Isa, Townsville and Cairns bases provide regular health clinics to properties and townships throughout the vast area of rural and remote Queensland. At these clinics the Registered Nurse who is Child Health trained and Immunisation Endorsed will conduct a “well baby” clinic and offer Immunisations as required. In many of the communities the Child Health Nurse works in partnership with an Indigenous Health Worker who is an invaluable source of information and in many cases acts as an interpreter when communications are not clear.

The Cairns RFDS Nursing Team provides a weekly Child Health clinic at the Mother and Baby Centre in the remote Indigenous community of Kowanyama in Cape York Peninsular.

Services provided during this clinic include:

- monitoring of weights, growth and development of babies and children
- advice about feeding, breast, formula and solids
- health education, regarding all aspects of care
- immunisations
- routine screenings for development
- assessment and treatment of unwell babies under the Rural and Remote Isolated Practice Endorsement
- monitoring and supporting babies and carers who are at risk or have been notified as children of concern to the Department of Child Safety.

These baby clinics are typically very busy with an average of 20 babies being seen during one day. It was during these frenetic clinics where mothers and carers sometimes waited for hours that the idea of
a Playgroup materialised. The Playgroup Queensland organisation was very keen and supportive of the concept and from this a submission for funding from the Golden Casket was formulated.

**Rationale**

The unacceptably poor health outcomes experienced by Indigenous children in Australia, particularly those living in remote areas such as Kowanyama is well documented. This project aimed to improve these outcomes by establishing a group modelled on the Playgroup Queensland format. Playgroup Queensland is a well established organisation that has been providing informal sessions for many years where parents, carers, children and babies can get together in a relaxed environment.

All children from 0-5 years including babies and their parents have been encouraged to attend. The benefits that children experience from activities at playgroup include developing sensory, social and communication skills. Playgroup has been such a success because children:

- participate in new experiences
- develop and increase their social skills
- learn sharing, co-operation and simple routines
- interact with other adults and children in a safe environment
- enjoy learning more about their world
- early learning prior to school
- development of motor skills prior to school.

Adults have also benefited from playgroup because it provides opportunity to:

- meet other local families and develop new friendships
- relax and talk in a friendly environment
- share experiences and ideas
- play with children and nurture a spirit of co-operation
- take up opportunities for personal development
- learn new skills e.g. Craft work using resources/materials found in the home
- developing different skills to teach their children at home prior to school
- learning how to make affordable and age appropriate healthy snacks and meals.

Research has demonstrated that the experiences of early childhood can have a profound lifelong impact on a child’s health and well-being. The importance of the early years of life in influencing future outcomes, such obesity, heart disease, mental health problems and poor school outcomes have been identified and highlighted. Early intervention using play is well recognised as a key to early development of fine and gross motor skills (Centre for Community Health, 2001) Furthermore, interactive play leads to development of problem solving skills and appropriate social skills.

Following consultation with the Kowanyama community, including Indigenous Health Workers, Kowanyama Community Council members and the Kowanyama Justice Group it was identified that there were limited resources and services to support mothers and children with healthy growth and development.
The resources provided by Playgroup have also facilitated an educational base for the carers and mothers in regards to learning different aspects of play that support development and assist with parenting skills in relation to behaviour management.

The group structure of the day helps support the parents and carers and assists in developing networks at a grassroots level and fostering capacity building within the community.

There are numerous documents and policies that guided the development of the goals and objectives of this project. They include:

- Queensland Health Strategic Policy Framework for Children’s and Young People’s Health 2002–2007
- Strategic Policy for Aboriginal and Torres Strait Islander Children and Young People’s Health 2005–2010
- Optimal Infant Nutrition: Evidence-Based Guidelines
- Queensland Health Guidelines for Using Screening and Surveillance in the Early Detection of Childhood Health Conditions

**Goals**

The aim of the project was to:

- increase children’s (aged 0–5 years) opportunity to develop sensory, social and communication skills
- increasing parents opportunity to play with children and nurture a spirit of co-operation, share experiences and ideas and develop skills in preparing healthy and nutritious meals for their family
- strengthening the capacity of Kowanyama community to independently co-ordinate a Playgroup Program.

In January 2006, RFDS Cairns recruited with the assistance from Playgroup Queensland, Loraine Iboai an Indigenous Playgroup Facilitator. Since this time Lorraine has been flying to Kowanyama from Cairns with the RFDS Child Health Nurse on Wednesday of each week. On this day she facilitates a Playgroup in the Mother and Baby Centre in conjunction with the RFDS Child Health service.

The day is planned for in advance and generally includes three or four main activities which mix the gross and fine motor and sensory skills required to carry out the activities. Lorraine prepares the necessary requirements which range from painting to making the play dough and craft work. Mild to hot weather most of the year is very conducive to outdoor play and we will be expanding to water toys when the outdoor storage area has been completed. The project also includes a healthy eating component where a healthy meal is provided. In addition Lorraine has been responsible for identifying and building capacity of local mothers who display an interest in facilitating future Playgroups, following the completion of the project in December 2006.

**Challenges**

Although to a large extent the project thus far has been a resounding success, there have been a number of challenges which perhaps are to be expected of a project of this nature which is set in a remote Indigenous community. Challenges have included:
• Community Engagement: Although several key community members had supported the development of the program the challenge of engaging local women presented as the initial challenge. The Playgroup concept was quite unfamiliar within the Kowanyama community and therefore a great deal of time and energy was placed on discussing and explaining the Playgroup concept with local women. (Very few mothers would access respite day care on their rare visits to the city preferring to leave the children in the care of family and friends.) Susan Markwell a RFDS Child Health nurse who had been conducting Child Health Clinics in Kowanyama for the past 16 yrs played an instrumental role in gaining this acceptance by having an established rapport and trust with the mothers and the community.

• Cultural gaps and engaging the clan groups—Within the Kowanyama community there are three clan groups which are often reluctant to be involved in the activities together. Loraine’s previous experience working with different clan and cultural groups in Cairns provided her with ability and understanding to manage engaging all three clan groups in the Kowanyama community.

• Time considerations for negotiations with community council—and other key stakeholders—the once a week visit to Kowanyama made it a challenge to conduct a clinic and meet with people on a face to face basis which has better results when trying to negotiate amongst many parties. The quiet suspicion of new ideas from outside once again made good understanding of the playgroup idea of paramount importance.

• Recruitment of appropriate staff—Playgroup Queensland was very supportive with advice on required qualifications, position description and also participating on the interview panel. We were looking for an Indigenous person with playgroup experience who was prepared to travel out to the Kowanyama community.

• Insurance for the families attending the Playgroup was incorporated into Playgroup Queensland (Qld). Activity Cards, guidance regarding appropriate and safe toys, paper work regarding documentation of attendance, registration of families and feedback forms were all supplied as part of the Playgroup Qld resource package.

• Urban areas have easy access to the Toy Library which gives small group a wide range of toys that can be borrowed on a short term basis. This model is not appropriate for the Kowanyama project with the tyranny of distance and limited aircraft space posing as limitations.

• Playgroup Qld have also indicated support for a capacity building workshop with the local Kowanyama women later in the year.

• Security and storage—Kowanyama is different from other Cape communities in that the Child Health Clinic is conducted away from the main Health Centre. The old hospital was renovated by the Kowanyama Council and set up specifically as a Mother and Baby Centre in 1998 so the playgroup is very fortunate to have a venue that accommodates our needs with plenty of space. The community council has been very supportive with a pledge to build secure storage area for outdoor toys and we are having further negotiations for more modifications such as a sun shade over an out door play area.

• Introduction of new concept—The Sing and Grow program was planned for third term after the main Playgroup had been established and in operation for seven months. Sing & Grow is a Playgroup Queensland initiative funded by the Australian Government under the Stronger Families and Community Strategy. Sing & Grow is an early intervention and prevention music therapy project that provides programs in the community for families with children aged up to three. Weekly sessions over 10 weeks provide families with the opportunities to participate in developmental skills and encourage parents to learn new and different ways to use music as a way of interacting and playing with their children. The program has an early intervention focus and is conducted by a Registered Music Therapist. The Kowanyama Sing & Grow group has a flexible approach where the sessions are tailored to the families that are present at the time and the sessions...
are run throughout the day rather than the fixed one hour session at a set time. This flexibility works with the community as time has a different priority in the community setting.

- Working within a setting that has limited governance and goals that are far from a main stream centre. Local politics and family clan group issues pose an extra challenge with negotiations.

- Sensitivity to cultural issues. Sadly funerals are an all too common event in Indigenous communities with Kowanyama being no exception. If there is a funeral being conducted in the Community there would be very few if any attendees to the group. The funeral is an all day event and many relatives travel from far and wide to attend. This poses a challenge for the momentum of the playgroup.

- Skin infections and varying levels of hygiene requires extra vigilance with the cleaning of the toys following each day. All children are encouraged to wash hands prior to play and eating as is the case in all day care centres.

- Limited variety of food brands, fresh fruit and vegetables in the store has extended the imagination to maintain the boundaries of the budget. The Tropical Population Health Recipe book (Deadly Tucker, Department of Health Western Australia 2004) with pictures and ingredients required has been an excellent resource. Lorraine has modified many of her home recipes and adapted them with the different available ingredients and many of the mothers have asked for the recipes.

- Transportation—limited space and seats on the aircraft has its own challenges for a fly in fly out model. Kowanyama is located on the western side of Cape York Peninsula, 600 km from Cairns and is accessible by driving 9 hours over a mostly dirt road or taking a one and a quarter hour flight in a Kingair from Cairns. All of the cape communities and properties become isolated in the wet season for somewhere between three and five months in which time they are only accessible by air. This means there must be forethought to stockpiling resources such as medications, fuel, avgas, dry goods and playgroup equipment well before the wet sets in. During the wet season weight and fuel restrictions apply to the aircraft and the RFDS is very limited with its payload. Once the project was approved we commenced a shuttle of toys and heavier resources up at the beginning of the year in the dry season.

Strategies

- Lorraine engaged the community’s key players during the initial consultations and was well accepted

- Modified the regular playgroup to include a variety of craft works to increase Mother participation – Lorraine built on previous experience with marginal groups in suburbia and found that this strategy was successful

- Poster at the shop with photos of local community children involved in Playgroup is an excellent way to advertise the activities and with the participants being well known in the community, this actively encourages others to participate in the Playgroup

- Advertising on the poster the next weeks planned activities that will be happening at playgroup is an effective way of spreading the word.

Outcomes

Eight months into the project there have been numerous successes and these include:

- morning teas and lunches provided made from healthy produce purchased from the Kowanyama shop involves the mothers in the purchase and preparation of the food

- mothers report Improved behaviour from children and it has also been observed by Lorraine
• improved parenting skills with gentle encouragement of behaviour management by Lorraine. Some examples are in relation to sharing of toys, management of tantrums, verbal responses and positive feedback during the play sessions

• improved fine and gross motor skills with exposure to new toys that would not usually be available to most of the community children

• social interaction for both parents and children in a safe and stimulating environment that would not normally be available for people of Kowanyama community

After nine months the Kowanyama community is well engaged with excellent attendance rates. In addition, a few key mothers in the community have displayed an interest in facilitating the program in the future. Numerous strategies have been developed to record the program progress and development including weekly attendance records, weekly participant summary and feedback forms, a photographic index and records of informal group discussions. It is anticipated that by the end of the 12 months there will be increased capacity within the Kowanyama community to implement a sustainable Playgroup in the community.

Evaluation

Records kept of weekly Playgroup including attendance records, summary sheets of participant involvement and feedback (planning and reflection). During each of the sessions Loraine has been gathering informal feedback about the day’s activities and thoughts about future activities.

A qualitative questionnaire conducted with the attendees was modified and simplified and retrialled and is a work in progress. Initially there were 9 questions in the survey but after the first week’s trial it seemed like a very long process sitting down with each parent and going through the questions, which took a lot of time out of the playgroup sessions.

The modified questions were:

• How did you find out about playgroup?
• Why do you come to playgroup?
• Have you or your child/children learnt anything new from playgroup?
• Have you noticed any changes in your child’s behaviour/development since coming to playgroup?
• Have you got any ideas about playgroup that can make it better for you?

This has provided a useful way of getting feedback from the participants. For example, some parents have stated an improvement in their child’s ability to share and have reported an increased support network. To some extent the attendance rates speak for themselves.

Lessons learnt

• The challenges of working in a remote Indigenous community
• The challenges of working across numerous Government Departments and NGOs.
• Time taken to build local capacity
• Flexibility to deal with unforeseen events e.g. funerals and planned community activities that impact on Playgroup e.g. Under 8s day, council meetings
• Having an independent Indigenous person who is not affiliated with any Clan group initially helped to engage all groups
• Good ideas are worth fighting for.
Plans for the future

Sustainability is a major priority for the project. The project has been working towards identifying two to three local Kowanyama women who are interested in continuing Playgroup and committing to the ongoing facilitation of the group into 2007 and beyond.

Negotiations are in progress with Kowanyama community council to support the local women to be involved in the Playgroup via allocating two positions to be funded through the Community Development Employment Program CDEP.

Negotiations are also in progress with the Department Employment and Workplace Relations (DEWR) to support the two playgroup co-ordinators to complete their Certificate II with a view to go on and complete the Certificate III in Children Services.

RFDS has successfully obtained partial funding to support the continuation of the project into 2007. This includes funds to support Lorraine to continue her visits to the community on a slowly diminishing scale. The plan is fortnightly for three months then stepping down to monthly for the remainder of the year. The ongoing funds have come from Golden Casket administrated via Queensland Health.

Of the six communities we visit on Cape York Peninsula only Aurukun has a purpose built day care centre. There is potential for the Supported Playgroup concept to be introduced in order to fill the void in some of these communities.

Reference

Centre for Community Child Health, Early Intervention Parenting Project Improving access to Playgroups for all Families; Literature Review, July 2001. Royal Children’s Hospital, Melbourne

Presenters

Susan Markwell is a flight nurse with child health and midwifery qualifications who has been working with the Royal Flying Doctor Service (Cairns Base) since 1990. Susan has been pivotal in the provision of continuity of care with Indigenous and child health services on Cape York Peninsula for the last 17 years.

Lorraine Iboai has been employed by the Royal Flying Doctor Service (Cairns base) since early 2006 and was the co-ordinator for the Kowanyama Community Playgroup project. At the end of 2006, Lorraine took up her new position of Community Liaison Development Officer—General Health. Prior to working with the RFDS she was employed by Crèche & Kindergarten Association as an Indigenous Playgroup and Family Support Officer. In this role she co-ordinated Indigenous playgroups in the Cairns and surrounding districts.