Impact of partnerships on the primary health care approach to a program in rural Western Australia

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“Bookstart” is a program that was developed in the UK in 1992, with the aim of improving literacy and numeracy skills in children. The program provides packs containing free books and information, including local contacts and activities, to parents and carers of babies aged seven to nine months.

English research identified that babies involved in the “Bookstart” program demonstrated clear advantages in literacy and numeracy skills over their age peers upon entering school. Reading was stimulated across all age groups regardless of age, ethnic group, social class or language.

Like many other Health Services in Western Australia, Speech Pathology within Midwest Health Service receive many referrals for school aged children with literacy difficulties. In keeping with the Primary Health Care philosophy of prevention and promotion, early childhood literacy was identified as a target area in the Speech Pathology business plan for 2002. It is anticipated that the implementation of a District wide Bookstart program will have a positive impact upon referral rate and reason for school aged children in the future.

The focus that we take in presenting this paper however, is not on the “bookstart” program itself, but rather the way in which it was planned and implemented utilising collaborative partnerships.

ABOUT THE MIDWEST

Following a recent restructure of Health services in Western Australia, Midwest Health Service has now become part of a greater Midwest and Murchison Health Region, however for the purposes of this paper, comments will be confined to an area that extends along the coast from Greenhead in the South to beyond Kalbarri in the North, and extends more than 800km east into the hinterland. This area covers almost 470,000 square kilometres, in which there is great diversity of industry from fishing, tourism, broad acre farming, pastoral and mining and equally great diversity in population levels from 100 to 2,000 per community. The services provided by the Midwest Health Services expand across this area, however do not include the population of Geraldton. It is often described as a doughnut area that circles Geraldton but does not include it.

This slide shows the individual communities making up the service area of the Midwest. They range in distance from 80 to 220 km from Geraldton. These are the towns to which the Speech Pathologists travel to on a monthly basis. Just as explanation, the Midwest Health Service employs and locates a range of allied health clinicians in Geraldton mainly due to recruitment and workforce issues. From the
central location of Geraldton, they all provide a district-based outreach service. Under this outreach model, each site receives at least half a day of service each month, with the larger sites receiving a day each month. Visits often occur between times or are supported via videoconference links, as there always seem to be something extra that will pop up along the way.

IMPLEMENTING BOOKSTART—HOW DID WE GO ABOUT IT?

Literacy skills were an identified area of need within the Midwest Health Service and with this in mind, the Speech Pathologists, along with Community Health Nurses set about devising a way that would best introduce the Bookstart program into the Midwest communities whilst ensuring compliance with the Primary Health Care service philosophy.

Initially Midwest Health Service began the planning in conjunction with another local Health Service. Together we approached local businesses and community organisations seeking support in the way of funding or donations for the project. Unfortunately this approach did not work as well as expected and it was back to the drawing board to try and raise the funds required to establish the project.

An application was made for funding under an internal Innovative Service Development grant option. We were successful in this application allowing us to further develop the project. The funding requirement was predominantly for the books and bag, however even funding secured, it was felt there was a need to empower the community to enable them to have ownership of the project. With this in mind, a Bookstart committee was formed comprising of Child Health Nurse representatives, the two Speech Pathologists, and our Primary Health Care co-ordinator.

Together we identified ways in which respective communities could become involved with the project and achieve the goal of implementing the Bookstart program that was understood by all, valued and therefore had increased opportunity to be both successful in reducing future levels of referral and sustainable over time.

COMMUNITY INVOLVEMENT—HOW WAS IT ACHIEVED?

The program was initially promoted to multi-disciplinary health providers, community groups, local services, (for example Department of Education WA and Shires), and the general community. Once awareness was raised regarding the project, we set about targeting specific groups for a higher level of involvements.

Local auxiliaries were approached for support in the way of funding. Each community/Health Service was able to provide funding support of some description. This achieved the aim of giving the community ownership of the program and also set the foundations for continuation of the program once the funding we received has been expended.

Schools within the Midwest area were invited to enter a design competition for the logo that would be screen-printed onto the bags. This helped to raise the awareness of the program within the communities, and indirectly promoted the importance of
reading to children in their early years. It allowed us to provide promotional material to teaching staff and to the parents through articles in the school newsletters. Additionally, the children reinforced this information with parents and staff through their interest and involvement in the logo competition. Our design competition winner was from a school in Latham (which currently has 18 students enrolled in the school). He was presented with a certificate, book voucher and bag (printed with his logo) at a school assembly by the Speech Pathologist who provides services to the town. This was reported by the local newsheet and additionally the local regional newspaper, providing further and widely disseminated information about the program and its goals.

A local business was approached for a “good deal” in the purchasing of the materials required to produce the bags. Fortunately for us we were able to obtain quite a good deal. The lady at the fabric shop, after hearing about the program and the impact on language development was extremely helpful in assisting us when calculating how much fabric we required. I honestly don’t know how she did it!!

Now to making the bags. We had all this fabric and thread. What we required now was a group of people armed with scissors, sewing machines and a bit of know how to manufacture the initial requirement of 300 calico bags. Suggestions were made that we could have a working bee at the office where we all and sundry could pitch in and help. The idea of spending my day making calico bags was not that appealing, so off to the Country Woman’s Association we went.

The Midwest Division of the Country Woman’s Association came to our rescue and held a working bee of cutting and sewing to get us started. Each individual community branch has now taken over the reins and are continuing to stitch away at the bag manufacturing, and as can be seen from the photos, they have had a great time also.

So we have the bags and we have a logo. Somehow we need to get this logo onto the bag. We approached local businesses again to complete the screen-printing of the bags. Alas this was not to be and once again the lovely ladies from the CWA came to our rescue!! Finally we had the bags—logo and all!!

Throughout the planning process of the program, promotion of the program was continuing to occur through media releases in the local newspaper and within the individual community publications. We ensured that this coverage focused on a range of issues that supported our partners in this program and promoted the program including the importance of reading to babies and toddlers for language development. The program promotion was vitally important. It was through this that we were able to add value to what is really a very simple, but effective program of raising parent awareness and providing resources for involvement by them at an early age in their child’s language development. So to recap the strategies that we used, they were;

- logo design competition through the schools
- linkage with community/child health nurses for promotion of the program through their daily contacts, supported by flyers and other printed material to support the program
• liaison with key community stakeholders as a continuing thread throughout all phases of the planning, implementation and evaluation

• media involvement as previously outlined

• Formalised program launch for the “bookstart” program in each of the communities. The launch format and venue was organised locally with lots of energy and enthusiasm shown by all.

NOW WE’VE GOT THE BAGS … WHAT DO WE PUT IN THEM?

In consultation with Speech Pathologists from other Health Services who were implementing similar programs, we decided upon some baby friendly books to place in each of the bags. These are a heavy duty card design with simple pictures and a handle for the baby to hold. We identified within some of our communities that these books may not be culturally appropriate and set out trying to find a book that may be appropriate for our Indigenous population. This we discovered in a book from Broome entitled “Look and See”. Our aim is for the respective schools within the community to begin developing books specific to the cultural aspects of their community. This has been accepted as a good school project and we hope to have success in this project towards the end of 2003. Another example of collaboration that assists in sustaining the momentum and focus of the program while ensuring the cultural appropriateness.

Together with the book, information is provided in way of a booklet explaining the importance of book sharing and reading and ways in which you can involve children in reading. This booklet was purchased from the UK and is the booklet used within the UK Bookstart program.

Finally, a locally generated pamphlet is included which provides details on the Bookstart program, local library services, Child Health Nurse clinic times, local Speech Pathology service contact details and acknowledgment of community involvement in the development and implementation of the program. Attached to this is any other information about relevant groups or activities that can be accessed that supports early language development. The local Child Health Nurse is responsible for the accuracy of all local information included within the bag.

GETTING THE BOOKSTART BAGS TO THE BABIES

The Bookstart bags are provided to the babies at their seven to nine month old Child Health Nurse checks. This health check was identified as having the highest rate of uptake within the Midwest Health Service by mothers with new babies. The health checks following this have a significant drop in the numbers attending, so by giving the Bookstart bags at their seven to nine month old health check we are able to access as many of our new babies and mothers as possible within the community.

It is critical that in giving the book bag to the parent and baby, that the child health nurse takes the time to explain the program, the approach to reading with a baby and the links to other activities, groups or resources to support language development.
within the local area. Evaluation is being considered to determine the impact on parent behaviour related to reading looked at to

The Child Health Nurses launched the program in each of their respective health sites. At most sites these launches coincided with a playgroup or mother/baby health day that the Child Health Nurse had organised. Members of the community and health service staff were also invited to attend and the launch was celebrated with the first of our babies being presented with their book bags.

**WHERE TO FROM HERE?**

The program could be described as being in its infant stage. We launched the program in July 2002, and have received nothing but positive praise. The only negative comment I have heard is that the shire libraries don’t have a large enough range of books for children within that age range, but in truth this must be seen as a positive as it means that parents are now looking for more books for their children.

Identified areas for where the program can be extended to from here include:

- reading mornings at the shire libraries (or other venues such as the telecentres) supported by the Therapy Assistant, or community members within the town
- “Adopt a Grandparent” type program where the older residents within the community are able to participate in book sharing and craft activities with the children
- extending the logo into a life like character and approaching local theatrical societies to “become” the character and visit reading mornings held either at the site or via telehealth
- involving school aged children in developing community culturally appropriate books to go in the bags
- empowering the individual communities to approach their respective shires about expanding and or developing the books held within the library
- promoting the importance of book sharing and reading from an early age through media releases and through local school newsletters
- incorporating book reading and Bookstart promotional activities into the annual Children’s Book Week
- creation of booklists which can be given to parents outlining what to look for in children’s books and the titles of books appropriate to different age groups. This can be achieved in collaboration with the regional library and allow for rotation of books through the various shires.
CONCLUSION

Bookstart’s success so far has been a result of multiple collaborative partnerships with support received from many avenues including, Commonwealth Rural Health Services Program, Schools, Midwest Division of Country Women’s Association, Morawa Country Women’s Association, individual CWA branches within the communities, Community Health Nurses, Telecentres, Play groups, Mothers groups, Hospital auxiliaries, local businesses and Speech Pathologists.

From a Primary Health perspective the program has great value as it addresses one of the known “social determinants of health” (literacy). We now await these babies coming of school age so that we can evaluate the impact of the Bookstart program upon Speech Pathology referrals within the Midwest Health Service for literacy and numeracy.

Anecdotal evidence to this point would indicate that the program is having a positive impact upon the community and is achieving the objective of promoting the importance of sharing and reading books with children from an early age.