

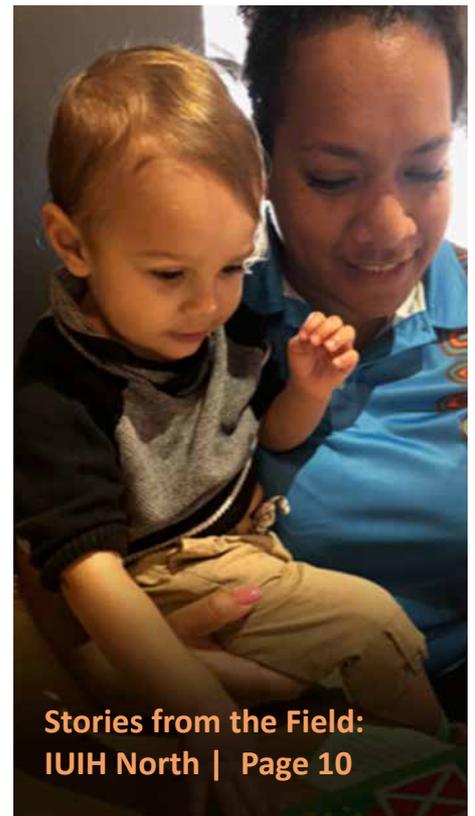
The Australian Nurse-Family Partnership Program (ANFPP) National Support Service (NSS) acknowledges the traditional custodians of the lands and waters on which we live and work. We pay respect to elders past and present. We further acknowledge that Aboriginal and/or Torres Strait Islander people and communities are diverse and dynamic and continue to evolve and develop in response to historical and present social, economic, cultural and political circumstances.

Diversity includes gender, age, languages, backgrounds, sexual orientations, religious beliefs, family responsibilities, marriage status, life and work experiences, personality and educational levels (Commonwealth of Australia, 2013)

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# Welcome

## Sue Kruske, National Program Director

Welcome to the first official newsletter from the National Support Service. We are contracted to provide these newsletters every six months and we want them to be ... well.... Newsy!

So, for this edition we have enlisted the help of a journalist to help us deliver the material in more of a storytelling style. We hope you like it and please let us know if you do, or don't.

2020 will go down in history for many reasons but of course the health and economic crisis that resulted from the COVID-19 pandemic has affected every one of us in Australia in some way. Coincidentally, this was also the Year of the Nurse and Midwife, certainly significant for the nursing profession, and what a year to demonstrate the selfless sacrifice they made as they came to work to either care for patients on the front line, or to be deployed to other areas of the sector.

ANFPP teams across the country were able to adapt and flex to continue to meet the needs of their clients and families. Care parcels were dropped off, telehealth methods adopted and text messaging increased. We have some lovely examples of this in this newsletter.

Similarly, the NSS team had to modify how we did business with lack of travel opportunities and the need to move our education sessions online. I am incredibly proud of how we achieved this and evidence of the success of our efforts is



Above: Sue Kruske with the NSS team

seen in the feedback we get from the sites and the increase in attendance at our monthly Community of Practice meetings.

So, thank you all for your ongoing commitment to support the program. I hope each one of you has some time off over the Christmas break to regenerate and spend time with family and friends.

## Mursal Azami, Senior Program Manager

Seems like it was only yesterday that we officially transitioned into the new NSS on July 1st of this year.

Since that time, we have worked hard setting up the NSS within the Molly Wardaguga Research Centre at the Charles Darwin University and recruiting key staff to join our team. In August we distributed promotional materials previously organised by the former NPC and it was great to hear that all our sites have now received their bulk supplies of five items: a nappy/sports bag, muslin wrap, feeding set, bucket hat and magnet photo frame. The feedback has been extremely positive.

Some key milestones achieved in this short period includes the successful transition of existing platforms and resources across to NSS; improved engagement with our stakeholders through key meetings; the development of our internal NSS Annual Action plan across the three streams (program management, education and data); and the successful hosting of the 2020 Annual Data workshop and meetings in a virtual format. Thank you once again for everyone's active participation: we were so pleased for feedback that the event exceeded your expectations. Your feedback is important to us to help us improve our future Annual conferences and workshops and we hope to provide you an even better experience post COVID-19 pandemic.

In October the team established our NSS core team values of trust, connection, partnership and growth. We are driven by these shared values and are motivated by a sense of privilege and purpose, working with the ANFPP sites across



*Above: The ANFPP Team celebrated Day 1 of operations on 1 July 2020*

the country to make a difference in the lives of women and their families.

Together with our newest team member, Netta Finney, who joined us on 2nd December as our Communications officer, next year will bring additional opportunities.

Please note the NSS Christmas Closure dates are from 24 December – 1 January.

Have a Merry Christmas and a prosperous New Year.



## Kym Cunningham, Clinical Lead

COVID-19 hasn't stopped NSS from rolling out a full education and site support calendar in the past six months – albeit by 'virtual' means, says ANFPP Clinical Lead Kym Cunningham. Here is her report on 2020 activities and a peep at what's to come in 2021.

Despite the delay caused by COVID-19, core education training including online Dyadic Assessment of Naturalistic Caregiver-Child Experiences (DANCE) continued to be provided virtually in line with the education calendar. And then, in the first week in December, we were able to hold our first "new look" Unit 3 + Partners In Parenting Education (PIPE) face-to-face training in Brisbane. Participants from the Institute for Urban Indigenous Health (IUIH), Wuchopperen, Danila Dilba and Top End Health Services (TEHS) enjoyed the opportunity to come together.

In the 2021 education calendar, almost finalised, we are scheduling visits to all 13 ANFPP sites, and will be delivering all Unit 2 and 3 education face-to-face. This is a wonderful opportunity for team members to learn from each other. Our 2021 curriculum will also include new sessions on Data collection in the ANFPP, Kimberley Mum's Mood Scale, ASQ and ASQ-TRAK and the Strengths and Risks (STAR) framework.

As 2020 comes to a close, here is a list of activities, many via Zoom and webinar, held this year.

- Fortnightly Zoom education has been held for six new (and not so new) Nurse Supervisors, covering topics including: the many hats of a Nurse Supervisor, Core Model Elements, ANFPP home visit guidelines, Reflective Supervision and Data collection in the ANFPP.
- The first in our professional development webinars series was held in November. Dr Robyn Thompson presented on the Thompson Breastfeeding method and 100% of participants gave feedback that they would be interested in attending future PD webinars offered by the NSS.
- A Yarning Tools review is currently being undertaken by Aboriginal team members to ensure cultural appropriateness and user acceptability. This review will support the updating of all client materials over the coming year.
- Role-specific Community of Practice (CoP) meetings have been well attended, with many participants saying they enjoy the new format, the opportunity to share stories with team members from other sites and the education sessions.
- Regular Reflective Supervision (RS) sessions continue to be provided for Nurse Supervisors (NS) by the Clinical Lead, NSS Clinical Psychologist or external providers as requested by each NS. Reflective Practice content is also included in the NS education and CoP meetings.
- The STAR framework pilot project has commenced and the final version of the adapted framework and education will be ready by 30 June 2021.



When it became feasible, we were excited to travel to Cairns to do a site visit with the Wuchopperen team. It was a wonderful chance for the NSS team to meet the Wuchopperen ANFPP team and to work through their annual Quality Site Self-Assessment with them.

Remember, we are always just an email or phone call away.  
Send your general feedback via [feedback@anfpp.com.au](mailto:feedback@anfpp.com.au).  
The education email address is: [education@anfpp.com.au](mailto:education@anfpp.com.au)



*Above: Kym Cunningham with the ANFPP team during Unit 3 training*

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## Sandy Campbell, Systems Manager

Capturing evidence of the empowerment of mums taking part in the Australian Nurse-Family Partnership Program (ANFPP) is just one project on the 2021 to-do list for the NSS Data Team.

Empowering first time mums – their healing, gaining control, becoming strong culturally and spiritually, and their self-belief to successfully manage life’s challenges – is a critical indicator of the success of the program.

In 2021, the NSS is planning a project specifically to explore the best way to collect data to capture this empowerment of mums where it occurs. Several ANFPP sites have already expressed interest in being involved in the project working party.

Reviewing, streamlining and revamping reporting mechanisms and forms has been a focus for the team in recent months to constantly improve its data support services.



- Quarterly Fidelity Reports: Work is underway on a New Look Fidelity Report to be consistent across all program sites regardless of which ANFPP data collection system is used. The main purpose of these documents is to report on how ANFPP implementation is aligning with the program Core Model Elements. After our Virtual Data Workshop at the end of October, we distributed a draft of the New Look Report and received a great response to our request for feedback. We will be making further changes to the document in 2021 to continually improve the quality of the document and reporting.
- Exception Reports: The exception (error) reporting process has been reviewed and revamped with the aim of making it easier, more streamlined and more user friendly for program sites. We now approach detected missing data and probable data errors separately. Data Quality Reporting deals with data errors and Data Completeness Reporting deals with missing data. In the process, we seek site feedback regularly – every six to eight weeks.
- Communicare Data Collection Project: New Communicare Data Collection forms are also on the way. The Data team has been working closely with the NSS Education team to undertake a careful review of the ANFPP forms and we look forward to piloting the new forms early in 2021.
- Jigar Patel joined the Data team in September on a part-time basis to assist with the ANFPP National Knowledge Access (ANKA) help desk and other data tasks.





## Nikki McGrady, Program Educator and Consultant

### The Crucial Role of Family Partnership Workers

Family Partnership Workers (FPWs) are crucial to the success of the Home Visit Teams within the Australian Nurse-Family Partnership Program (ANFPP), says Nikki McGrady, who took on the role earlier this year as FPW educator at the National Support Service.

“When we’re doing our training with the home visit teams, I can’t stress enough how important the FPW role is,” says Nikki. “They provide the cultural link. The teams can’t do the work without the FPWs.

“FPWs play a significant part in supporting and empowering people who are going to work in Aboriginal and Torres Strait Islander communities.

“The FPW can guide ANFPP team members to work in culturally safe ways, making sure they are aware of cultural protocols and making sure they are respecting Aboriginal and Torres Strait Islander people and communities, acknowledging they are the experts in their own lives.”

Nikki, who has experience working as a FPW at the Institute for Urban Indigenous Health in Brisbane, says an important part of her job is supporting and helping FPWs grow – so that they in turn do the same with the mums they connect with.

“I think we can always grow & learn,” says Nikki who is involved in training and workshops for the home visiting teams.

“FPWs undertake three units of education in their first six months - advocacy and communication; supporting women experiencing domestic and family violence; and being

important community role models: these are just a few of the important issues we need to support the FPWs in.

“I remind ANFPP team members to think about who they may be inspiring while they are working in communities. It might be a client or the team around you. We often don’t realise the seeds we are planting.

“Watching the nurses and fellow FPWs, have inspired me,” says Nikki, who is finishing the second year of a nursing degree. “It doesn’t have to mean all FPWs want to be registered nurses or midwives. But they should be given opportunities. There are also other pathways such as Aboriginal health worker or practitioner, or community service or social work.”

This year has been a time of growth for Nikki. “As well as a new job, which is so rewarding and challenging, and the studies, I also became a Grandmother for the first time.”

Being an Aboriginal woman and a mum, Nikki says she learned the importance of having support, the value of education to be able to grow and empower herself, and the significance of resilience and strength and nurturing her Aboriginal cultural heritage.

Clinical Lead for the ANFPP NSS, Kym Cunningham says how fortunate we are to have Nikki on the team of educators: “Nikki comes with such broad experience and has great leadership qualities. In addition to her direct experience working as an FPW, she has worked in many Aboriginal communities in NSW and Queensland, as a community consultant working in family support and in administrative, program and managerial roles. She also worked in the



*Above: Nikki McGrady with FPWs Bronwyn McClure and Fallon Dalton*

mining industry as a FIFO. She also has that lived experience as a young Aboriginal mum, which can't be underestimated when teaching in a program such as the ANFPP," says Kym.

"Our clients are very much like I was as a first-time mum," says Nikki. "I had people who were my mentors, strong Aboriginal people in maternal roles, who helped me to be a good mum. My son is 22 and daughter is 14. I always said I could have really benefited as a first-time mum if I'd had the ANFPP.

"Being an FPW was great, and I have been able to share what I've learned with my daughter-in-law and son, about their baby, development and the maternal role."

Nikki misses the client contact she enjoyed as a FPW and working in the community. "That is why I value the Community of Practice meetings once a month with the FPWs, which are now more personal and interactive as we use Zoom," she says.

"It's a time when we can all support each other, provide updates, share our challenges and successes, share resources. It's a time to get together and yarn. It's my chance to discuss with the FPWs what's happening in their roles and communities, and about being on country."

## Stories from the Field

### IUIH North: Creative telehealth meets the COVID-19 Challenge

Creative telehealth plans, including Zoom for online home visits, check-in calls, texts and email, and non-contact delivery of care packs and gifts has been a major initiative by the ANFPP Institute for Urban Indigenous Health (IUIH) North to deal with COVID-19.

The sense of trust that has developed between ANFPP and its clients has been a major factor in successfully overcoming the challenges of a rapid adoption of telehealth to accommodate the need for physical distancing. Our clients trusted us when we informed them that we needed to change the way we delivered our program; they trusted us when we advised them to stay home; and they trusted us when we started offering home visits, allowing us back into their homes again.

The journey taken by one particular client illustrates our telehealth success. We have been working with her for almost two years now and throughout this time she has overcome many challenges through pregnancy and very soon after the birth of her beautiful baby. Despite how tough it was and how many unknowns there were, she remained engaged with both the Family Partnership Worker (FPW) and the Nurse Home Visitor (NHV) as well as with the clinic and allied health team.

Her son was 18 months old when COVID-19 hit and it was she who supported us as we navigated teams and Zoom, at

times even showing us how to work it! Through patience and small steps, we soon had regular home visits up and running online and we enjoyed changing our backdrops and finding new and creative ways to keep her toddler entertained. We wanted to ensure we kept up the pattern of visits, both supporting and walking alongside mum in her journey as a first time parent and with bub, delivering content and role modelling as well as interacting and playing.

In addition, we managed to complete data collection, Ages and Stages Questionnaire (ASQs) and still share content through screen sharing, texts and email. Care packs, Mother's Day gifts and Activity packs were shared through non-contact delivery.

We also offered regular check-in calls and texts in between our home visit video calls which were well received and often initiated by the client. We received regular photos and videos of bub and updates on how mum was going with work and study.

Whilst all of us understood why we had to stay home and stay safe as we navigated this pandemic, both the ANFPP team and the client also felt deeply about missing the face-to-face in-home visits.

ANFPP North looks forward to celebrating with this client in the New Year as we say goodbye and Happy 2nd Birthday!



*Above: ANFPF team connects with clients via online meetings*

## IUIH South: COVID ready with sanitisation packs, mindfulness packs and live streaming

ANFPP South in Goodna was motivated to go that extra mile when COVID-19 surfaced, to ensure the team stayed connected with their mums, bubs, families, community and each other. Here is their story, told by Nurse Home Visitor Amy Gallienne and Administration Assistant Fumiko Nelio.

When we were first informed that we would have to change how we do business, we immediately thought of how that would impact on our clients and on our team. We knew that we were going to have to make changes but had no idea how far reaching it would be. This is what we did:

**Sanitisation packs** – We came up with the idea of providing our mums with what we called ‘sanitisation packs’. These packs included hand gel, a small pack of baby wipes, a mask and an information sheet on how to effectively wash your hands. This was our way of educating our mums how to keep themselves and their family safe and to use effective hand hygiene.

**Mindfulness Pack** – This pack was designed to help our mums remain grounded and as calm as possible. Our mums loved receiving these packs which included mindfulness pictures designed for colouring-in and coloured pencils. Colouring-in has been shown to relax the fear centre of your brain, the amygdala. The aim was to give our minds the space to have some rest during the intensity of COVID-19.



*Above: Clients receiving essential COVID-19 supplies from the ANFPP team*

**Food Hampers** – We wanted to ensure our families were safe and to help them to limit exposure to the virus. There also had to be thought put into their delivery, to ensure our team members were not put at risk. The food hampers were packed with items that were balanced with fresh produce, bread and milk, with the driving force being to support healthy eating, and they included what was apparently the most valuable resource on the planet at that time – toilet paper. This initiative was our way of not only protecting our families but also to encourage them to remain engaged as they could then sense we genuinely cared and had their best interests at the forefront of our program.

**Facebook Live Streaming** – Our first live stream occurred on Tuesday 7th April, 2020. We wanted to provide some humour and joy to our mums through these sessions with the main goal to help them stay connected. These sessions alternated between cooking and arts/crafts. The cooking



*Above: ANFPP team conducting virtual meeting*

As a result of the effects of COVID-19, we have grown as a team, with challenges and triumphs which has made us even stronger. Unfortunately some clients did not respond well to the changes and engaging them was one of our challenges. However our retention rate of clients was positive and we can only think it was due to our motivation to go the extra mile during this time.

Throughout, we maintained a common focus of what was best for our clients and that, my friends, is how we feel that this year has been as successful as it could possibly be.

And as we approach a new year, our story continues...

live stream was centred around a health focus, easy to find ingredients and uncomplicated recipes. The arts and crafts were more about getting the mums to take time out for themselves, tapping into their creativity, and to use items that were organic and recyclable. The live streams occurred over several locations but mainly at the office. We were really encouraged by the support of both current and past clients as well as our work colleagues.

**Home Visits** – This was a challenge and had to be given careful consideration. Some staff were happy to continue home visiting with social distancing, providing the client was well and other staff continued via Microsoft Teams, Skype, phone calls and visits in the driveway and backyard. Some of the clients preferred using technology while others looked forward to face-to-face contact. During this time, staff continued to check in with clients over the phone more regularly than they would have normally.

## Nunkuwarrin Yunti: Deadly Dads

Playing video games and barbecues as a chance to connect and/or bring dads together as a group are just two ideas that Trent Turner has floated since he recently took on the role of Men’s Aboriginal Family Partnership Worker at Nunkuwarrin Yunti in Adelaide.

“It’s a case of engaging with the young dads, making the connection, and building trust and rapport,” says Trent, who applauds the long-term component of the program. “It’s a two-year connection, which I believe is the only way to go to develop that trust.”

Two years ago, Nunkuwarrin Yunti’s ANFPP became the first in Australia to create the specific role of Men’s Aboriginal Family Partnership Worker to support dads and Glenda Woodall, Nurse Supervisor of the Program in Adelaide, has witnessed the benefits. Glenda saw the potential of engaging the dads in the care of their babies and toddlers while nursing in Alice Springs and, on joining the ANFPP in Adelaide, she says “it became clear very early on that it was important to get the dads on board.

“Within the program in other states, there have been male FPWs working with the mums, but we recognised a gap and the need to have something specifically for the dads,” she says. “Going out on visits, they would ask ‘Is there someone for me to talk to as well’ and so we began to think of a specific Men’s FPW.



*Above: FPW Trent Turner with baby Nylah and dad Ricky*

Trent is keen to explore and trial many avenues. “It is of course a collaborative team effort,” he says, “and I will be working closely with the FPWs and nurses assigned to each client – and the wider team – to see what works for the dads.”

Both Trent and Glenda are aware that their progress will be watched with interest across Australia. Another Men’s Aboriginal Family Partnership Worker position has been created in Katherine in the Northern Territory and other Nurse Supervisors have been expressing an interest in the role.

Trent has brought extensive experience to this role, having spent 10 years with the Department of Child Protection. “Lots of people I was caring for and supporting were in their late teens – and many of our fathers in the program are teenagers,” he says. His experience includes helping people with everyday issues such as housing and employment, helping them develop their life skills and also working with clients in high-risk situations. In his new role he will be facilitating and supporting new dads to learn about their



child's needs and development, become aware of how their behaviour may impact on their family and encouraging behaviour change to contribute to providing a loving, safe home.

Trent was drawn to the caring profession through numerous casual jobs while studying: tutoring high school students, working as a youth worker with Catholic Education, working with Aboriginal boarders and mentoring.

"I see multiple benefits in giving the dads someone who will engage and support them," he says. "It could be someone to speak to on the phone, to debrief after the birth or during an extreme situation, such as a child protection issue.

"There are some resources for men, and I think that will be another area to look at." The ANFPP in Adelaide is in the process of developing its own booklets specifically for fathers aimed at the three phases of Pregnancy, Infancy and Toddlerhood.

"I am already talking to some dads who are keen to look at digital media such as Instagram to connect with me and other dads," says Trent. "Podcasts are another tool – that could be handy when they are up in the middle of the night with a restless baby. Gaming with a few dads is another idea – it's maybe not learning about health – but it could be another space for men to support each other."

Trent also considers his strong cultural upbringing is a door-opener with the dads. "I've always been very connected culturally and that has definitely helped with connecting with some of the fathers. I've always found

it a great starter," he says. "A perfect example is a non-Aboriginal dad whose daughter is Aboriginal and who wants to learn more about the culture.

"Some Indigenous dads don't have much connection with their family or culture, and others are wanting to learn about their partner's culture."

Glenda says Trent's youth and interest in media are also a bonus. "He's suggesting things I wouldn't have thought about," she says.

Trent's role is to encourage engagement and he's coming up with innovative ideas. It's important to have the dads supporting the mums and to be recognised in their own right – Trent's role is to encourage the fathers – to help them be the best dad and partner that they can be. While the mums are encouraged and supported to attend their antenatal appointments, for example, so too can Trent support the dads whether it's a job interview, encouraging them to attend antenatal appointments too, engaging the dads in their own health care and educational opportunity or appointments concerning housing etc. Someone they know and trust.

"I can't stress enough how important the dads are in helping mothers, to understand what their partner is going through, be it post-natal depression or something else, to be present and active in the lives of their children and learning good parenting practices, being involved in contraception decisions. There's so much we can support them with: letting them know how valued they are as they prepare for their journey into fatherhood."

## Rumbalara: Engaging and connecting

A week-long initiative during Women's Health Week was just one successful activity run by the ANFPP program at the Rumbalara Aboriginal Co-operative this year.

"It has been a really difficult year - very hard in Victoria," says ANFPP Nursing Supervisor Liz Eliason, talking about nine months or so of COVID-19 restrictions. "And this was just one initiative we did for our mums who were feeling particularly isolated. They knew that we were thinking about them. They tell us it really meant a lot – and that is so rewarding."

The co-operative is based in Mooroopna, a rural town north of Melbourne, on the banks of the Goulburn River opposite the larger town of Shepparton.

The Women's Health Week activity comprised a box of goodies and five envelopes containing a different activity for each day, which was a great success for mums in the in Mooroopna.

The envelope for the first day contained four inspiration cards, with clients choosing one, putting it in a prominent place and taking a photo to share. The 'winner' of that day received a yoga mat. The next day was two recipes for soup using the vegetables in the goodie box and clients sharing photos again - of kids helping with cooking in the kitchen and ideas for storing and freezing vegetables for future use.

Then came the 'step' challenge, says Liz, which actually lasted for 20 days, with the aim of completing 100,000



Above: The ANFPP team in Rumbalara

steps. Some mums have kept that challenge going with one mum, so mortified to realise how few steps she was taking a day, immediately instigating walking her older child to kindy at least once a week.

Friday revolved around health checks, encouraging the mums to make sure they book an appointment if it had been a while, while Saturday was Connect to Country. This encouraged clients to go out, acknowledge they are on Yorta Yorta land, take a photo or something beautiful, pay their respects, still their mind, and take in the beauty of nature around them.

A private Facebook page is also proving a huge success, says Liz. "It's something they can log into at 2am when they are feeding, or when they have a few minutes to watch a video on nutrition, or other aspects of being a young mum. And they've discovered how much they enjoy sharing ideas, comments and photos with other mums."

Liz has seen a massive increase in numbers and engagement since she joined the ANFPP at Rumbalara two years ago,



*Above: NAIDOC Cookies created by the ANFPP Team*

from just a handful of clients with minimal involvement, to 26 clients who are actively engaged, following the program and enjoying it.

“COVID-19 has obviously made a big difference,” she says. “From an operation involving home visits weekly or fortnightly, drop-in days and cultural activities – to one-on-one Facetime calls and 15-minute visits while wearing face masks.

“We’ve worked hard to find other ways to engage, and to encourage our staff and clients to connect and everyone is trying their best to keep in contact.”

Liz says the mental health of her clients is a top priority, and a focus is on helping mums build feelings of self-confidence and self-worth.

“It’s easy to think everyone else has got it together – but of course that’s not the case. You can sense it when they pick up the phone. It’s hard for first-time parents to deal with adults and also their peers when they feel unsure of

themselves with issues like breast feeding or bottle feeding, or what they are dressing their baby in.

“It’s important for us to make our clients feel special and cared for. We are often the only contact they have outside the family.

“I don’t know if it is a current trend, as this was the case even before COVID-19, but a lot of our mums do lack self-confidence and self-worth. In addition, there are statistics showing that domestic violence has escalated during the pandemic.”

Looking to the future, Liz says a number of mums will keep up the step challenge; the private Facebook page will continue after the COVID-19 restrictions are over; and staff will continue to find novel ways to connect with their clients.

“We are really looking forward to 2021, the easing of COVID restrictions and restarting home visits and face-to-face contact.”

## TEHS Wurrumiyanga: Damascena conquers ASQ-TRAK to support strong bubs

Top End Health Services (TEHS) Family Partnership Worker, Damascena Tipakalippa has not allowed the COVID-19 pandemic to stop her from the goal of completing her ASQ-TRAK child developmental screening training.

Despite a 'pause' of three months due to Covid-19 travel restrictions to remote communities, Damascena Tipakalippa is now consolidating her learning by implementing the ASQ-TRAK developmental screening tool for observing and monitoring the developmental progress of Australian Aboriginal children.

Damascena has embraced the implementation of this tool and is quickly gaining confidence in its use with the ANFPP families in Wurrumiyanga (previously known as Palumpa), a community on the southern coast of Bathurst Island in the Northern Territory.

Damascena, in partnership with the NHV, Ann Van Haaren, are helping parents gain confidence in identifying their parenting and children's areas of strength, areas for further learning and areas for following up with other professionals such as the Community Child Health Nurse, Hearing Health and doctors.

Damascena has identified child development as an area where she would like to strengthen her learning. This is being addressed by the Nurse Supervisor who is also a Child Health Nurse, by providing additional training opportunities



*Above: FPW Damascena Tipakalippa with baby Gabrielle and mom Christina*

on site and by linking Damascena with the local Health Clinic to participate in future professional development.

Already, the NHV and Damascena have gone on to identify various developmental areas for immediate referral, ensuring Aboriginal children in Wurrumiyanga grow up to be strong and meet their full potential.

## TEHS: Wadeye team goes to Pulumpa

The Top End Health Service ANFPP Wadeye team recently drove to the Palumpa community for the day to see a client for the first time – in a trial that could lead to potentially regular monthly ANFPP visits.

This story provides a glimpse of how TEHS ANFPP, through continuous reflection, is able to address ways to meet the evolving needs of clients, including supporting them to meet their ‘heart’s desire’ and autonomy.

Allowing the ANFPP team the flexibility to travel between the two communities aims to address and minimise ANFPP client disengagement due to families frequent transitioning between communities.

Palumpa (population 343) is a 50-minute drive on unsealed road from Wadeye, the 6th most populous town and the

largest Aboriginal community in the Northern Territory, with a population of 2280.

The team visited Pulumpa after they graciously got permission from one of the Traditional Owners and Aboriginal Health Practitioners and approval by the District Manager and Nurse Supervisor.

Due to the recent community mood, Wadeye clients have been travelling to Palumpa and other neighbouring communities for a break and to connect with other family members. Community members’ travel in the past has been fluid between the local outstations and two neighbouring communities.

From time to time, ANFPP clients miss out on regular program delivery due to being located in the neighbouring communities that are between one and two hours away.

During the visit, the ANFPP Nurses, Alison Kay and Marianne Haverkort and Family Partnership Worker, Julie Thardim were able to link in with the Remote Midwife, the local Strong Women Worker, the Clinic Manager and staff. This resulted in strengthening the relationship between ANFPP and the local Health services, supporting future referral pathways for ANFPP families.

Over a picnic lunch, ANFPP was able to introduce the program and discuss the strengths and opportunities our program offers to a prospective client. Although shy, the pregnant mother was interested to learn about her growing baby, and see a model of the foetus inside her amazing uterus.



*Above: FPW Julie Thardim and NHV Alison Kay yarns with a young prospective client during a picnic lunch*

The meeting was enhanced by yarning in language on how to nurture and care for her first baby and the benefits of receiving support on birth and mothering. The merits of the program include how clients can be assisted to grow into strong and capable women.

The team also enjoyed a tour of the community and background from FPW Julie Thardim on the history of the community over the past three decades and an explanation of the language groupings.

On the return trip, while Julie discussed all the bush tucker that was or soon would be available in the area, she noticed some green plums temptingly close to the road. The team stopped the ANFPP Prado, tasted the delights of the plums and gathered some for the return trip. A perfect opportunity for hands-on experience to end a successful day!



*Above: FPW Julie Thardim picking some green plums*

## WACHS: Positive changes in service delivery

ANFPP Nurse Supervisor Emma Ramsay and her ANFPP team at Wellington Aboriginal Corporation Health Service (WACHS) in Dubbo, talks about adapting to the challenges forced upon them by COVID-19 – and along the way, identifies some positive changes they hope to sustain beyond the pandemic.

With restrictions in place, the team started working from home, adapting the ANFPP to a telehealth model. Phone visits were performed on an alternate basis between the AFPW and NHV assigned to each client to ensure ongoing relationships with both members of the Home Visiting Team.

The local post office became accustomed to our regular mail outs of milestone gifts and self care packs for clients, including DIY dream catchers, which were well received. For the first time we used email to contact clients and provide resources and support and, for clients with the capacity, we used Webex, and then Microsoft Teams to facilitate engagement and observation of client and child. This continues to be an option when we are unable to see clients due to illness, and will result in a decrease in missed visits.

Email was used to provide regular updates to service providers and referral sources. With many services unable to accept visitors to their premises, we filmed clients talking about their experiences on the Program: these have been provided on branded USBs to services with our interactive



*Above: Jess and Nikkita preparing for a video chat with a client*

referral form and PowerPoint presentation, and included on our website. We are particularly proud of the clients who took part in this, as we were all nervous about appearing in front of a camera!

As a Nurse Supervisor, I want to take the opportunity to thank the ANFPP Team here at WACHS, our management, and the NSS, for their commitment and flexibility in these challenging times.

### **Steep Learning Curve**

The use of telehealth has been a steep learning curve and forced some changes quickly, but from my perspective telehealth has revealed possibilities and unexpected positives that could broaden our service and care. I had not long joined the ANFPP program as a NHV and with little experience in home visiting, we were asked to work from home due to COVID-19.

It was a bumpy start trying to establish therapeutic relationships with clients and navigate working together



with AFPWs remotely. I found this uneasiness was mostly on my part - getting used to having deeper conversations with women I had only just got to know over the phone or via web. I soon realised many of our clients are young and they were quite comfortable with technology and communicating over the phone came naturally. Many were very quick to deepen their trust in us and many shared their worries with mental health struggles and lack of support. It could be that for some it was easier to have the harder discussions remotely, as there was a level of comfort not having to look us in the eye and the safety of being in their own environment.

Of course, there were issues with telehealth that are hard to resolve. These issues included not knowing if other people were around so some questions we couldn't ask; not being sure if pauses were just time they were thinking or they had finished the discussion. Since being back in the office and the continued scrutiny on mild symptoms, it is wonderful we can still offer telehealth visits for clients. I still find a few of the clients share more over the phone than in person.

### **Following Heart's Desire**

Amelia\* was referred to the ANFPP at 12 weeks by the midwife (and previous NHV) at the local AMS. She was allocated Francie as her AFPW and Ash as her NHV, who supported her through pregnancy and when she gave birth to her daughter, Kay\*. Both of Amelia's workers left and myself and NHV Lowana started working with Amelia when her daughter was around 6 months of age.

Since being Amelia's AFPW, she has achieved two goals she had set herself while on the Program. One of her goals was to be able to take her daughter out in public without

being anxious and worried about seeing the family of Kay's father. This was due to past trauma she has had from them. Amelia was referred by her AFPW to attend the Uniting playgroups every Thursday. Amelia at first admitted she didn't think she was going to attend and pushed herself to attend the first session and now loves it and hasn't missed a day in over two months. Amelia's previous AFPW Francie works there also and Amelia said that made her feel more comfortable in attending the playgroups. Amelia was very thankful that I had supported her in attending and has made the comment she wouldn't have done it without me.

Amelia's second goal was to re-enrol in her TAFE course which she had started but didn't get to finish. Amelia re-enrolled this year and is now currently studying fulltime and completing two days a week prac at a school and the other three days she will attend online classes to finish. Amelia has over 100 hours to complete for her prac and has made the decision to pull out of the ANFPP and put all her focus on completing her TAFE course to better her future and to be able to get a job and show Kay that she can do anything she puts her mind to. Amelia struggled with making the decision to leave the ANFPP and stated multiple times she doesn't want to leave but knew she wouldn't be able to commit to visits while studying fulltime. Amelia thanked both AFPW and NHV for the support we have given her over the past seven months and we wish her all the best.

*\* Client and family names have been changed to protect the identity of families.*

## Wurli-Wurlinjang: Graduation COVID-19 style

Wurli-Wurlinjang in Katherine recently celebrated the graduation of seven families – COVID-19 style. Here is their story, as told by Nurse Supervisor, Bridgette Hutchinson.

Although we were restricted with participant numbers and venue size, we were recently able to have two graduation parties where the team and families reflected on their achievements and goals for the future. It really has been



Above: FPWs Andrea and Renee enjoying a socially distanced lunch with NHVs Jane and Gail

a pleasure for us to see the families and babies grow and share in their journeys.

For one young family, the past 2½ years involvement in the program had low periods where engagement dropped off and the team was worried about their wellbeing.

Working with NHV Margie and FPW Andrea, a strong trusting relationship was built, and the home visit team was able to support the family through periods of adversity such as legal problems, family problems and substance misuse. The team clearly saw the strengths in this family.

The family has now graduated and the young mum has achieved her goals of obtaining her driver's licence, securing housing for the family and has recently started a new job. Both her and her partner have worked on their substance-use problems and are facing a bright future.

The family attended graduation and spoke about their journey and the support that they have received from the program. The mum continues to text updates to Margie which we love to hear and we look forward to seeing both mum and dad blossom as leaders in their community.

We expanded recently with the addition of two new staff members; Micheala is part time admin and part time FPW and Marisa is part time admin and part time outreach RAHP. Both Micheala and Marisa are ANFPP program participants. We are lucky to have them join our team. They offer a great insight as young mums who have accessed ANFPP support.

NHV Jane, who is relocating interstate, has worked in the program for nearly three years and her exceptional



organisational skills and friendship will be missed by the team and her clients. NHV Gail is transitioning to Wurli's Women and Children's Service, where she will continue with her great work in supporting and engaging clients. She won't be far away so we are looking forward to continuing to work together for the best outcomes for Wurli families. We have a new NHV, Sophie, who is new to the Territory. Sophie has a calm, kind nature and is a great addition to the team.

The year seems to be slipping away and the team continues to work hard to provide support and guidance to the new mums in and around Katherine. We look forward to an exciting year ahead, continuing to build upon the programs strengths and positively influence Wurli. Two examples of this are the fortnightly antenatal classes that we have established which target Aboriginal women, and the first stages of implementing Trauma Informed Care across the organisation.

We are also looking forward to relocating to our new ANFPP office site which has been built with our clients and program in mind. It will have a group activity room, playground, deck area and is co-located with Wurli's Woman's and Children's Health team.

## New NSS Staff Profiles

### Netta Finney



**Role:** Communications Officer, NSS

**Qualifications:** Currently studying a Master of Communication (Journalism) Deakin University; Bachelor of Commerce (Marketing) Griffith University 1995.

**Why did you join the program?:** I feel passionately about empowering Indigenous women, especially young mums, to be the most deadly mums ever and to raise awesome little bubs. I would be honoured to be a witness to their journeys and to support them to use their voices to tell their own stories and create enduring legacies for their own descendants.

#### Fun Facts

**My favourite food:** Mexican and Thai (but must be vegetarian); any type of cake

**My favourite past time:** Playing and hanging out with my kids

**Favourite movie:** Black Panther; Captain Marvel; The Grand Budapest Hotel; Anything with Will Ferrell and John C. Reilly (they are so ridiculous that they always make me laugh)

**Favourite book:** *A Mother's Story* by Rosie Batty (I met her and she is amazing); *Why does he do that?* By Lundy Bancroft

**Favourite holiday:** Travelling around Europe and the UK (I so want to go back when I can afford it)

**Favourite moment as a mother:** Being able to build a fabulous life for myself and my children after escaping domestic violence and role modelling strength, independence and resilience. Showing them that we all deserve to be treated with love, kindness and respect.

## Emily May



**Role:** Senior Practitioner - Perinatal Mental Health and Parenting

**Qualifications:** BA (Comms) (social inquiry); Grad Dip (psych) (hons)

**Why did you join the program?** Supporting women and children's health has always been a passion of mine, this role is a unique opportunity for me to contribute my skills to this space.

### Fun Facts

**My favourite food:** A delicious Thai stir-fry

**My favourite past time:** I love all things adventure, mainly mountain biking and snowboarding

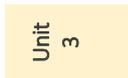
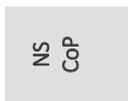
**Favourite movie:** Any Christmas movie!

**Favourite book:** Rising Strong by Brene Brown

**Favourite holiday:** New York, so much to do and see

# 2021 ANFPP Education and Site Support Calendar

Month	Week 1					Week 2					Week 3					Week 4					Week 5									
	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F	M	T	W	Th	F					
January					1																									
February		1	2	3	4	5	8	9	10	11	12	15	16	17	18	19	22	23	24	25	26	29	30	31						
March						8	9	10	11	12	15	16	17	18	19	22	23	24	25	26	29	30								
April		1	2	3	4	5	8	9	10	11	12	15	16	17	18	19	22	23	24	25	26	29	30							
May						8	9	10	11	12	15	16	17	18	19	22	23	24	25	26	29	30								
June		1	2	3	4	5	6	7	10	11	12	13	14	17	18	19	20	21	24	25	26	27	28	31						
July						7	8	9	10	11	14	15	16	17	18	21	22	23	24	25	28	29	30							
August						5	6	7	8	9	12	13	14	15	16	19	20	21	22	23	26	27	28	29	30					
September						9	10	11	12	13	16	17	18	19	20	23	24	25	26	27	30	31								
October						6	7	8	9	10	13	14	15	16	17	20	21	22	23	24	27	28	29	30	31					
November						4	5	6	7	8	11	12	13	14	15	18	19	20	21	22	25	26	27	28	29					
December						8	9	10	11	12	15	16	17	18	19	22	23	24	25	26	29	30								
						6	7	8	9	10	13	14	15	16	17	20	21	22	23	24	27	28	29	30	31					

-  Public Holiday
-  Unit 2 Face to face
-  Unit 3
-  NS CoP
-  NHV CoP
-  FPW CoP
-  Proposed 2021 Annual Conference
-  DANCE (runs for 5 weeks)
-  Site visits
-  Proposed FPW face to face
-  Professional Development Webinar
-  NS CoP Face to face
-  ASQ-TRAK facilitator training