Welcome! - we will commence shortly

https://www.creatingpathways.org.au

You can post questions you have now using the Q&A feature

Please note: Live Events on Teams looks slightly different to Teams meetings in that you will not be able to see other participants

The Creating Pathways initiative was funded by the Australian Government through the Australian Research Council in partnership with researchers and partners at the following institutions, Government Departments, and Non-Government Organisations:
ACKNOWLEDGEMENT OF COUNTRY

Griffith University acknowledges the Traditional Custodians of the land on which we are meeting and pays respect to the Elders, past and present, and extends that respect to all Aboriginal and Torres Strait Islander people.
<table>
<thead>
<tr>
<th>DATE</th>
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<tr>
<td>June 17th</td>
<td>The power of a critical friend - Collective Change Facilitation</td>
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<td>1st July</td>
<td>Coalition Wellbeing Survey – The value of measuring the wellbeing of community partnerships</td>
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<td>22nd July</td>
<td>Getting the measure of children with Rumble's Quest: A tool for schools and communities</td>
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<td>29th July</td>
<td>The power of wellbeing data for community coalitions: Deciding Together risk and protective factor methodology</td>
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<td>19th August</td>
<td>The capabilities and uses of Parent’s Voice – incorporating PEEM – the Parent Empowerment and Efficacy Measure</td>
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<td>7th October</td>
<td>CREATE Project Snapshot– The major outcomes from the CREATEing Pathways to Child Wellbeing Project</td>
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<td>14th October</td>
<td>CREATE Futures – Future directions for community-based prevention utilising CREATE Project tools, resources and methodologies</td>
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<td>11th November</td>
<td>Strengthening Family-School-Community Relationships – An online Professional Learning Program designed to strengthen Principals’ leadership in forging school-family-community connections</td>
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<tr>
<td>Date TBC</td>
<td>The capabilities and uses of the new Economic Support and Reporting Tool (ESRT)</td>
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CREATE Project Snapshot

The major outcomes from the CREATE-ing Pathways to Child Wellbeing Project

Ross Homel
With Sara Branch, Bev Flückiger, Kate Freiberg, Jacqueline Homel, Greer Johnson, Sama Low-Choy, Tara McGee, Matthew Manning & Gabriel Wong

Griffith Criminology Institute
Centre for Social Research & Methods, ANU
Today’s Outline

• *The rationale*: Australia’s children are not doing particularly well, and schools and community services are not shifting the dial

• But population impact and system change CAN be achieved with public health strategies like Communities That Care

• The CREATE Project aimed to **build on CTC but facilitate change from within existing systems**:  
  • Objectives and design  
  • Where time & circumstance beat us  
  • Where we succeeded  

• Q & A
Phase 1: 2014-2016 – 10 CfC communities (5 + 5)
   Building the capacity to take collective impact to scale (Stage 1 of the Change Cycle)
Phase 2: 2016-2018 – 22 CfC communities
   Establishment of the prevention support and data collection systems
Phase 3: 2019-2020 – 22 CfC communities (9+13)
   Implementation: Stages 1, 2 & 3 of the Change Cycle
Communities for Children is a medium-scale community prevention initiative.

Really large-scale initiatives, outside the health sector, are rare.
Australia’s children were not doing well in 2020 - even pre-Covid-19
Australia is 32nd out of 38 rich countries.
What can early interventions really achieve, and how will we know?

John Lynch
The widespread preference for evidence-based programs, many of which have produced small effects on random categories of outcomes, that have not been replicated, seriously limits the ability of achieving increasingly large impacts at scale over time. (p. 8)

Summary

So in considering the evidence and its applicability to inform policy, practice and service delivery in 21st-century Australia, my key messages around outcome or impact assessments are:

- Encourage RCTs for our most promising new programs but we design and power them appropriately. That’s especially true if theory suggests effects in particular groups. It would be even better if these RCTs were pragmatic in that they could be conducted within existing service systems and in real-world conditions.

- In assessing evidence, always consider the local context of programs—positive effects found in studies conducted decades ago and in other countries where control
to researchers, research funders, reviewers and journal editors. In the health and medical care sector, researchers are responding to this challenge by applying consistent principles from evidence-based medicine. Perhaps such experience could be helpful in building a better evidence base for interventions in this field.

Of course it is necessary to have research and formative evaluations that show feasibility, acceptability and uptake of interventions. However, while that is a necessary component of any future outcome evaluation, it may not be sufficient evidence to justify public expenditure on early childhood interventions. We will need both formative and implementation evaluations, including assessments of the impacts on intended outcomes.

There is no doubt we need to develop new programs in this area and that will take a lot of hard work. And we’ve got to test programs in well-designed, adequately powered pragmatic RCTS. It is hard to imagine how we’d deliver resource-intensive programs, such as the ones mentioned above, in standard service delivery without good evidence.

Unquestionably, we need to have a conversation about what intervention “dose” is required to
What we need is “good enough” evidence, and that means understanding how close our quasi-experiments can get to randomised conditions, and creating good-enough comparison groups from population-wide databases.

achieve improvement and how that can be delivered at a large scale.

Additionally, there needs to be integration with existing services and information systems across the health, child care, preschool, education and child protection sectors. There needs to be a discussion about the use of existing administrative data. We collect lots of administrative data, but we’re not using it optimally for service improvement when we could.

More importantly, we need to develop well-planned, well-resourced and well-integrated iterative enhancements to existing services. Innovation is going on every day. Practitioners are changing the way they work and we need to leverage the innovation happening within service delivery. These are enhancements to usual care that potentially can be evaluated in a routine, rapid and cost-effective way. We need practitioners to think about practice-based evidence and how to partner with academia from the start to evaluate their innovations.

up and it gets funded as well. Unfortunately, there appears to be little corporate memory around these investments or an explicit strategy of managing a portfolio of integrated research investments to progressively build an evidence base for early intervention in 21st-century Australia. Program commissioners who buy interventions also need to be more savvy about what we mean by better quality evidence and what standards of evidence are needed.

I will conclude with a quote from Ed Zigler (2003), who is widely known as the father of Head Start—the iconic US kindergarten program begun as part of the President Lyndon Johnson’s War on Poverty in the mid-1960s.

Are we sure there’s no magic potion that will push poor children into the ranks of the middle class? Only if the potion contains health care, child care, good housing, sufficient income for every family, child rearing environments free of drugs and violence, support for all parents in their roles and equal education for all students in schools—without these necessities, only magic will make that happen. (p. 10)
Commonwealth Place-Based Service Delivery Initiatives

Key Learnings project

Sez Wilks, Julie Lahausse, Ben Edwards

Research Report – April 2015

Go to:

- Summary
- Key messages
- Download publication

Read full publication
Summary

Place-based initiatives are programs designed and delivered with the intention of targeting a specific geographical location and particular population group in order to respond to complex social problems. Typically, they focus on areas and communities with entrenched disadvantage or deprivation.

This report investigates the key factors and characteristics associated with successful outcomes with such programs, drawing on the international literature and evaluation studies of Australian government and overseas programs.

Key messages

- Many Commonwealth place-based initiatives reviewed had features that accord with those of international place-based initiatives, including common program elements such as design, delivery, implementation and evaluation.

- Evaluation of all these common elements is rarely done by either international or Commonwealth place-based initiatives.

- In particular, evaluations of Commonwealth place-based initiatives lacked sufficient evidence to establish the causal effects of initiatives, their cost-effectiveness and an understanding of how these initiatives work to achieve their goals. This was more pronounced among the evaluation of Commonwealth initiatives than in international evaluations.
Place-based primary prevention is possible: The Communities That Care Prevention System

- Get Started
- Get Organized
- Create a Plan
- Develop a Profile
- Implement and Evaluate

Creating Communities That Care
Building Community Capacity for Evidence-based Youth Crime Prevention and Collective Impact

The Communities That Care Model at Scale

Brian Bumbarger
AIC Crime Prevention and Communities Conference
Melbourne, Victoria
June 2014
419 age-grade cohorts over a 5-year period: youth in CTC communities using EBPs had significantly lower rates of delinquency, greater resistance to negative peer influence, stronger school engagement and better academic achievement.

The CREATE Project

The CREATE Project (Create-ing Pathways to child wellbeing in disadvantaged communities) aimed to build prevention science methods and measures – a Prevention Translation and Support System (PTSS) - WITHIN the routine practices of large scale community service and school systems in two states of Australia, Queensland and New South Wales.

- The focus was children aged 0-12 years, but mainly primary school-aged children 5-12 years.

- The electronic system provides reliable data and powerful tools for schools and community agencies to engage in data-driven decision making and evidence-informed action

- CREATE also used a population health methodology similar to Communities That Care – including the development of community-level child risk and protective factor profiles to guide decision making by community coalitions.

- **Research Question:** Does the Griffith Prevention Translation and Support System improve child wellbeing? **Answer:** We think so but cannot yet prove it!
The Griffith Prevention Support System aimed to complement the DSS support systems:

**The Data Exchange System (DEX)**

**The Communities for Children Facilitating Partners Evidence-based Program Profiles (CFCA)**

**The Expert Panel Project** - supports DSS-funded Families and Children Activity service providers to plan and implement programs and evaluate outcomes.

**The Communities for Children Outcomes Measurement Matrix** - validated measures for a range of child and parent outcome domains.
What we said to the ARC in 2017 about we wanted to achieve

This Project aims to test in nine disadvantaged communities a model for action that blends human and digital resources to support respectful, data-driven collaborations between schools, families and community agencies. The Project expects to generate new knowledge in the area of translational prevention science about how to influence risk and protective factors for child problems cost-efficiently at scale within existing service systems. Expected outcomes include learning communities amongst partner organisations and communities that disseminate project methods, tools and insights, supported by a new profession. Project benefits should include a methodology for achieving lasting improvements in child wellbeing, behaviour and school success.
Better lives for children in disadvantaged communities

Collaborative:
- Development is multifaceted, demanding that system silos be transcended through a comprehensive and integrated approach based on good governance.

Relationships-driven:
- Program delivery requires community engagement and trust built on connections between organisations and relationships between people.

Early in the pathway:
- Primary prevention by getting in early before problems emerge or become entrenched, with targeted programs embedded in a universal framework.

Accountable:
- A clear focus on measurable outcomes and shared responsibility for clearly articulated goals.

Training focused:
- Empowerment of the workforce through continuous skills development and building the efficacy of parents to achieve their own goals for their children.

Evidence-based:
- Programs and services have clear evidence for their effectiveness and are able to be implemented with integrity.

Good Governance

Empowerment

Stronger Developmental System
The CREATE Change Engine Cycle

1. Coming Together
2. Deciding Together
3. Planning Together
4. Doing Together
5. Reviewing Together
CREATE Outcomes

ITERATIVE DATA SYSTEMS
Data capture, reporting and management
Videos
Learning modules

Data guided decisions for evidence informed actions

COLLECTIVE CHANGE FACILITATORS
FAMILY, SCHOOL, COMMUNITY RELATIONSHIPS

CREATE Website
Videos
Community Coalition Portal
Project Management Portal
Blog

Rumble’s Quest

Parent’s Voice

Coalition Wellbeing Survey

RealWell Website
Economic Support and Reporting Tool

Griffith UNIVERSITY
Queensland, Australia
CREATE
Learning Communities
Collective Change Facilitator

Helping Hand
- Helps build relationships and trust

Critical friend – central role
- Help create a safe space
- Help guide collaborative reflection of successes and failures
- Help capacity building

Technical Adviser
- Facilitates the delivery of technical knowledge

*CCFs need to have a deep understanding of and empathy for the work of community coalitions, while maintaining a level of professional distance that enables them to support, guide and sometimes challenge practice*
Supporting Collective Change Facilitators by Enabling Access, Time, and Space

• Shift in organisational structures to enable CCFs the space to engage deeply with others, as well as develop and learn

• Shift in those managing or working with the CCF to let go and enable CCFs to explore, build relationships and develop a safe space

• Provide CCFs with the flexibility to respond when needed with a focus on the here and now
Use of Rumble’s Quest in Schools

• Total number of children who have participated (to September 2020) \( n = 18,415 \) (includes children attending schools in 5 states)

• Number of children from CREATE CfC schools \( n = 7106 \)

<table>
<thead>
<tr>
<th>STATE</th>
<th>NUMBER OF CREATE SCHOOLS WHO CONTRIBUTED DATA</th>
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<tbody>
<tr>
<td>NSW</td>
<td>2</td>
</tr>
<tr>
<td>Queensland</td>
<td>24</td>
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<tr>
<td>TOTAL</td>
<td>26</td>
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</table>
Wellbeing Varies Widely Between Schools - but taken as a whole:

- 71% of children like school
- 7% report feeling unsafe at school
- 46% feel they have many problems
- 32% frequently worry
- 34% frequently feel sad
- 84% frequently feel happy

What Schools and Families Do Makes a Difference for Child Wellbeing

When carers are consistently available and provide structure and reliable routine – children feel safer and more positive about the future.

When schools provide positive and stimulating classroom environments – children like school more and try harder.
Factors that contributed to successful implementation

- Strong support from leadership
- Time to prepare and time to respond
- Organised student support teams facilitate set-up for data collection phase and then work collaboratively to review reports and set directions for wellbeing support strategies.
The difference having Rumble’s has made

Confidence
• We had great data that let us go forward with confidence to restructure our wellbeing program
• You can’t understate the power of data – without it we were stabbing in the dark – Rumble’s Quest gave us direction.

Insight
• Our data suggested one of our programs wasn’t having the impact we’d hoped for. The evidence was what we needed to decide where to reinvest some of our efforts.
• It gave me food for thought about how to help grow the skills and conditions kids need for self-management.

Unique data
• Rumble’s Quest provided valuable information that’s not otherwise available.
• It helped identify issues we weren’t aware of and to make sense of some behaviours teachers had noticed – it made us more ready to help.
• Thank goodness for the data because it helped us deal with an issue we might otherwise have missed.

Purpose
• Having our RQ data has been worth its weight in gold – we can respond straight away and make sure wellbeing is integrated and relevant in the curriculum.

Clarity
• Our reports provided a concrete structure that helped us all think about wellbeing in a clearer way, and as something that’s tangible enough for teachers to work on – this was a big jump.
• Before Rumbles, we saw wellbeing as something vague and just assumed it under student health. Now there’s understanding of how it can be deliberately embedded in teaching practice.
• Rumble’s Quest has made my job easier.

Engagement
• There was lots of excitement about Rumble’s Quest.
• We’ve had great buy-in and our leadership teams are keen to make things happen in the wellbeing space.
• Our whole student learning and positive behaviour team gets involved in responding to the data and setting out our wellbeing plans. Rumble’s Quest is a real point of focus for these team conversations.

Mechanism for Change
• Our first-time results were a springboard for action – we provided Tier1 programs based on group results, as well as counselling and play therapy tailored to individual kids identified as vulnerable. The second time we saw we’d made a real difference.
• The benefits of our support work are showing clearly in our reports – even in some surprising areas.
Module One - CRITICAL REFLECTION: Leaders’ personal perspectives on family-school-community relationships

Whilst schools play a critical role in promoting children’s safety, wellbeing, and positive relationships, families, communities and their agencies also play important roles, collaborating with the school to support children in many ways.

In this module, we ask you as school leader to reflect critically on your own beliefs and perspectives that inform the relationships your school has with families and community organisations/agencies generally. The following activities (1-3) will assist you to reflect on these beliefs and perspectives – please undertake them in order.

1. Response to 20 questionnaire statements
Economic Support and Reporting Tool (ESRT)

Professor Matthew Manning
Dr Gabriel Wong

ANU Centre for Social Research and Methods
Research School of Social Sciences

Collaborators:
Mr Anushka Vidanage
Dr Hien-Thuc Pham
Better organization and presentation of economic evidence

ESRT offers electronic modules to be used by coalition members to:

i. Generate evidence of economic accountability (e.g. cost-feasibility, cost-effectiveness, cost-savings and cost-benefit analytics);

ii. Explain how services can be delivered to achieve outcomes in an economically efficient manner; and

iii. Support local coalitions to achieve measurable and sustainable improvements in outcomes.
Savings from Problems Reduced or Positive Conditions Strengthened

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<tr>
<th>Benefits and Savings</th>
<th>Benefit Breakdown 1 (BR1)</th>
<th>Note</th>
<th>Who is the Recipient (BR1)?</th>
<th>Bias Correction (%)</th>
<th>Corrected Benefit</th>
<th>Benefit Breakdown 2 (BR2)</th>
<th>Note</th>
<th>Who is the Recipient (BR2)?</th>
<th>Bias</th>
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<td>A$ 160</td>
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<td>society</td>
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<td>A$ 100</td>
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<td>A$ 100</td>
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<td>society</td>
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# CREATE Project Publications Plan: *30 in all!*

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<tr>
<th>Example publications</th>
<th>Lead author(s)</th>
<th>Planned date</th>
</tr>
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<tr>
<td><strong>CREATE overall</strong></td>
<td></td>
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<tr>
<td>A multi-authored monograph <em>(Springer)</em></td>
<td>Ross Homel</td>
<td>Mid-2021</td>
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<td>Evaluation of a place-based collective impact initiative through cross-sectoral data linkage</td>
<td>Jacqueline Homel</td>
<td>In revise and resubmit with an Australian journal</td>
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<td><strong>Rumble's Quest</strong></td>
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<tr>
<td>The development, psychometric properties, and community prevention utility of a digital measure of social and emotional wellbeing for middle childhood</td>
<td>Kate Freiberg</td>
<td>October 2020</td>
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Evaluation of a place-based collective impact initiative through cross-sectoral data linkage

Abstract

Every year Australian governments spend millions to deliver services to improve child wellbeing in disadvantaged communities. The Australian Government funds place-based initiatives like Communities for Children; state governments fund family support services to keep at-risk children out of the child protection system; and schools implement a wide range of behaviour management and other programs. Do these services have a beneficial, measurable collective impact on child well-being? This paper describes an ambitious attempt to link for one Queensland community, at the individual-level, data on 5-12 year-olds’ and their families’ participation in programs delivered through these three sectors, with data on child outcomes including social-emotional wellbeing and school behaviour. This data linkage exercise was not successful despite good will from all partners and ethical safeguards including written, informed parent/carer consent. Obstacles encountered included a lack of data on children and families’ participation in services (despite extensive Commonwealth and state investment in data collection mechanisms), lack of data on children’s outcomes, and prohibitive costs of linkages within government. We recommend that when parents/carers consent, government systems better facilitate data linkage to ensure that it becomes possible to assess the collective impact and cost-benefit of multisectoral services on the wellbeing of Australia’s most vulnerable children.

Keywords: child wellbeing, place-based programs, data linkage, collective impact, economic analysis, Communities for Children
Suppliers provide named data for all children

DATA SUPPLIERS
1. Schools
2. DSS Data Exchange
3. State-funded NGO family services

Supplies tabulated analyses of data for ALL children plus suppliers’ children

NATIONAL DATA LINKAGE INTEGRATING AUTHORITY
Produces integrated, de-identified linked file

Supplies integrated, de-identified linked file of ALL children

CREATE PROJECT RESEARCH TEAM
<table>
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<th>Example publications</th>
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<th>Planned date</th>
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<tr>
<td>The Coalition Wellbeing Survey and its Use</td>
<td>Clare Tilbury &amp; Ross Homel</td>
<td>November 2020</td>
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<td>Measuring the effectiveness of cross-sector collaborations to improve child wellbeing</td>
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<td>Collective Impact Facilitators – what have we learned?</td>
<td>Sara Branch</td>
<td>March 2021</td>
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<td>Collective Impact Facilitators' capacity to influence system's change when working from within</td>
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<td>School-family-community</td>
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<td>The impact of Principal-led Participatory Action Research on children’s wellbeing</td>
<td>Greer Johnson &amp; Bev Flückiger</td>
<td>April 2021</td>
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</table>
1. Rumble’s Quest implementation by schools was slower than hoped – we know now that rollout is a marathon not a sprint, in partnership with organisations, schools, and agencies that are ready to innovate

2. A consequence was that a rigorous test was not possible of the major research question: Can the PTSS improve child wellbeing?

3. A further consequence was that it was not possible to construct SA2-level child risk & protective factor profiles in time to enable CIFs and CfC coalitions to use them in planning priority services

4. Limited Rumble’s Quest take-up also prevented documentation of the many programs implemented by schools to improve child wellbeing & behaviour

5. Data linkage at the child-level to evaluate the impact of collective impact initiatives was shown not to be feasible across sectors, even in a single community – but we learned lessons that are critically important if Australia is to shift the dial for disadvantaged children

6. Time and resources did not permit the formation of comprehensive CfC-level coalitions incorporating schools and state-funded NGOs

7. The ESRT and the school-family-community initiative could not be trialled and widely implemented within a 2-3 year time frame – but are now ready for take-off!
Where the project succeeded

1. We achieved what we stated in the Project Summary – we aimed to be a disruptive influence, a catalyst for innovation
2. Implemented as much of the CREATE Change Cycle as was possible in a 2-year project – up to Doing Together
3. Brought school systems into sharper focus as critical components of local developmental systems
4. Supported the formation of the Collective Change Facilitator role as a new profession
5. Supported the emergence of three learning communities:
   1. NGO Facilitating Partners
   2. Collective Impact/Change Facilitators
   3. Research team
6. Developed a number of sophisticated, user-friendly integrated measurement, reporting, and action support systems:
   1. Rumble’s Quest
   2. Parent’s Voice
   3. Coalition Wellbeing Survey
   4. Economic Support and Reporting Tool
   5. Family-School-Community – Principal-led Participatory Action
7. Through these systems we have demonstrated the power of measure-report-reflect-plan-act-review:
   1. Revealed in our in-depth study of the implementation of Rumble’s Quest in selected schools, and in other implementation data (e.g., the coalition survey)
8. We developing a scalable methodology for measuring child risk and protective factors at the suburb/town level – and demonstrated that adjacent suburbs can have radically different child needs profiles