



# The First 2000 Days

Family and perinatal pathways  
for **re-shaping the future.**

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Towards a safe, stable and healthy future for families and children under five affected by homelessness, domestic violence, poor mental health and addiction.

Micah Projects is committed to nurturing equality and opportunity for women and their partners, babies, toddlers and young children in their first 2000 days (conception to five years) through a two-generational response.

MICAH PROJECTS



Breaking Social Isolation  
Building Community



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**Opposite:** Mother and child, healthy and well.  
*Photography, Katie Bennett.*

“We need to prioritise the early years and the way we think about early childhood development, providing as much protection as we can in the early years (from pregnancy to aged 5) is our best opportunity to address today’s mental health crisis and secure our health and wellbeing for the future.”

– HRH Princess of Wales, Royal Foundation Centre for Early Childhood

The crisis is driven by the high rates of child and family homelessness, domestic and family violence, mental health and substance use challenges, and childhood abuse including child sexual abuse.

More adequately supporting children with age-appropriate care, screening, learning and therapeutic interventions in the service systems that parents are already accessing, reduces barriers and enhances the health and wellbeing of the whole family, especially children.

A two-generation approach is investing in services for parents to meet their needs, and age-appropriate services for children in the first 2000 days.

**All women, children and adolescents have the human right to the highest attainable standard of health.**

The Global Strategy for Women’s, Children’s and Adolescent’s Health strives for a world in which every mother can enjoy a wanted and healthy pregnancy and childbirth, every child can survive beyond their fifth birthday, and every woman, child and adolescent can thrive to realize their full potential, resulting in enormous social, demographic and economic benefits.

– Every Woman Every Child, United Nations  
Global Strategy for Women’s and Children’s Health

# Why it Matters

## The first 2000 days of a child's life are critical

It is a time when children experience huge growth in their brains and bodies. If we take care of a child's physical, mental and emotional needs, they are set up for lifelong success. Families are essential to a child's growth, so by addressing the needs of parents and supporting parents to care for and support their children, we can help children's long-term health and wellbeing.

A vital and productive society with a prosperous and sustainable future is built on a foundation of healthy child development.

Positive early experiences provide a foundation for sturdy brain architecture, secure attachment and a broad range of skills and learning capacities. Health in the earliest years—beginning with the future mother's wellbeing before she becomes pregnant—strengthens developing biological systems that enable children to thrive and grow up to be healthy adults.

Early experiences are built into our bodies, creating biological 'memories' that shape development.

Science tells us that meeting the developmental needs of young children is as much about building a strong foundation for lifelong physical and mental health as it is about enhancing readiness to succeed in school.

Significant progress in lifelong health promotion and disease prevention could be achieved by reducing the burden of significant adversity on young children in the first 2000 days (five years).



### Health in the earliest years enables children to thrive and grow



#### Three Foundations of Lifelong Health

1. Stable and responsive environment of relationships
2. Safe and supportive physical, chemical, and built environments
3. Sound and appropriate nutrition beginning with the future mother's pre-conception nutritional status.



#### Caregiver and Community Capacities that Promote Health

1. Time and commitment including the nature and quality of time caregivers spend with children
2. Financial, psychological, and institutional resources
3. Skills and knowledge.

From Harvard University –  
Center on the Developing Child

## Impacts of parental trauma on children



**Parent experience of out of home care as a child**



**Domestic and Family Violence**



**Mental illness during childhood or as an adult**



**Social isolation and lack of community connection**



**Homelessness**



**Adverse adult experiences**  
e.g. substance misuse/violence

### CAN LEAD TO...



### WHICH CAN RESULT IN...

Poor physical health and physical disorders

Psychological disorders

Social isolation and loss of sense of place

Behavioural, emotional, cognitive and learning difficulties

Reduced educational attainment and/or academic achievement



## Domestic and Family Violence in Pregnancy and Early Parenthood

*Dr Monica Campo—University of Melbourne & Women’s Legal Service, Victoria.*

Women are at an increased risk of experiencing violence.

Young women aged 18–24 are more likely to experience domestic and family violence during pregnancy.

Poor birth outcomes such as low birth weight, premature birth and post-natal depression are associated with domestic and family violence during pregnancy.

If domestic and family violence already exists, it is likely to increase in severity during pregnancy.

Unintended pregnancy is often an outcome of an existing abusive relationship.

Pregnancy and early parenthood are opportune times for early intervention as women are more likely to have contact with health and other professionals.

# What the evidence tells us

## The impact of adverse experiences in the first 2000 days

For children growing up with exposure to homelessness, domestic and family violence, and the child protection system in poverty or other disadvantages, their development is at critical risk.

**Exposure to homelessness** exacerbates any other difficulties and results in negative direct (cognitive, social, emotional and biologically) and indirect (parent's caregiving capacity) outcomes for families and children. Housing instability and homelessness are highly stressful events for parents:

- Parenting capacity is impaired
- Mental illness is increased
- Parents face increased risk of chronic stress, depression and partner conflict.

**Exposure to family violence** negatively impacts development, mental and physical health and wellbeing.

**Poor parental mental health** can negatively impact on the wellbeing and mental health of their children.

**Parental addiction to alcohol and other drugs** negatively impacts children whether exposure occurs during pregnancy or during childhood. Parents who misuse alcohol and drugs are typically less responsive to their children and display less warmth, encouragement and engagement.

During pregnancy, stressors are keenly felt by the unborn child. A growing body of evidence is revealing that maternal gestation stress can impact health and development outcomes for the child.

### Across Queensland...

- **8,000+** children under 10 years of age accessed specialist homeless services in 2022.<sup>1</sup>
- **42.9%** of people accessing homelessness services were part of a family (the highest proportion of all presenting units).<sup>2</sup>
- **30%** of children needing short-term accommodation could not access it.<sup>3</sup>
- **34%** of children who needed mental health assistance, could not access it.<sup>4</sup>
- **Most families** presented to a specialist homelessness service with domestic and family violence and mental health issues. Many families were subject to child protection orders.<sup>5</sup>
- **1,700** young women aged 15 to 19 gave birth in Queensland in 2019.<sup>6</sup>
- **Nearly 700** Queensland prep students were suspended in 2022.<sup>7</sup>

### Across Australia...

- Every year, children in over **600,000** families are estimated to have seen or heard domestic and family violence.<sup>8</sup>
- **Over half** of women who reported experiencing domestic and family violence had children in their care at the time.<sup>9</sup>
- Infant death rates in the lowest socio-economic areas are over **80% higher** than the highest areas.<sup>10</sup>

### Across Micah Projects...

- **937** children under 5 years of age are working with us across all our services.
- **Our Family Crisis Support Team** is commonly seeing global development delay amongst the children we support.
- **Nearly 400** children under 5 years are supported by our domestic and family violence services every year.



the  
**commonapproach**<sup>®</sup>

A practical way to improve the wellbeing  
of children, young people, and families



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**Opposite:** Mother and child at occasional care.  
*Photography, Katie Bennett.*

### ARACY–The Nest, Canberra, ACT, Australia

ARACY, in partnership with 150 organisations and the voices of over 4,000 children, young people, and experts, developed The Nest, Australia's wellbeing framework for children and young people. The Nest shows that for a child to thrive their needs must be met in six key, interlocking dimensions:

1. **Being Valued, Loved, and Safe**
2. **Having Material Basics**
3. **Being Healthy** physically, mentally, emotionally
4. **Learning** within and outside the classroom
5. **Participating** in decisions, groups, and community
6. **Having a Positive Sense of Identity and Culture**



# Solutions



## What Works? Learnings and Evidence

Evidence from programs across Australia and the world suggest the following factors are important in supporting the needs of children and parents in the first 2000 days. If children are facing adverse experiences, we need to immediately address those experiences and give them positive experiences.

### Important factors for support

Collaborative, trauma-informed services

Access to trusted professionals

Supporting parents and families

Addressing health and mental health needs, including nutrition

Child interaction with other children and early learning programs

Regular development and health screening

Positive parent-child and family relationships

Safe and stable environments and housing

Connection to community

“ During our very early childhood, our brains develop at an amazing rate—faster than any other time of our lives. Our experiences, relationships, and surroundings at that young age, shape the rest of our lives.

It is a time where we lay the foundations and building blocks for life. It is when we learn to understand ourselves, understand others and understand the world in which we live.

– HRH Princess of Wales, Royal Foundation Centre for Early Childhood



**For further information refer to these successful programs...**

**Healthy Outcomes from Positive Experiences**  
positiveexperience.org

**Australian Nurse-Family Partnership Program**  
anfpp.com.au

**Parents as Teachers**  
parentsasteachers.org

**Zero to Three**  
zerotothree.org

**Restacking the Odds**  
rsto.org.au





# Solutions

## What Works? Learnings and Evidence

Child and Family Hubs bring together services to support families and children who have experienced poverty and adversity, including homelessness, domestic and family violence and health inequities.

Through co-location or networks, the Hubs and their partner organisations provide services in the Hub, offsite at external partner facilities or via outreach.

### Primary Focus

Advocating for and improving access to mental health support and participant care services for parents, children and families.

Highest priority services to be located within the physical Hub: early learning, development and care services for children.

### Hub management and staff

- Trusted professionals who can provide a safe and nurturing environment for children whilst supporting parents.
- Networkers and collaborators who can lead a portfolio of services and advocate for parent and child focused supports.

### Service system

(in the hub or in partner organisations)

- Housing and homelessness
- Domestic and family violence support
- Mental health, psychological and substance misuse support
- General health and medical support
- Justice services and support with engaging the child protection system
- Education, training, employment and community connection opportunities
- Legal advice, financial counselling and general counselling.

### Benefits

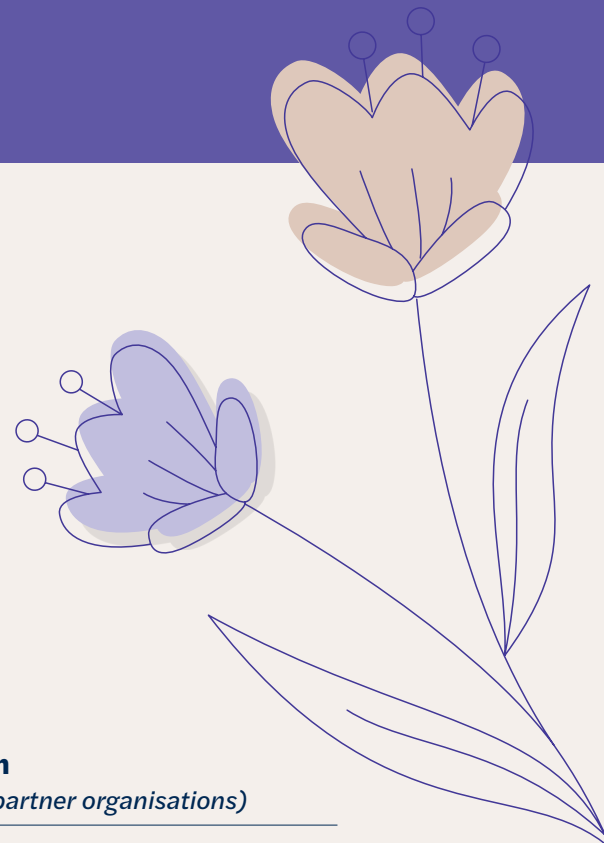
- Improved mental health outcomes for children and parents
- More efficient service delivery and more effective response to the needs of vulnerable families and children.

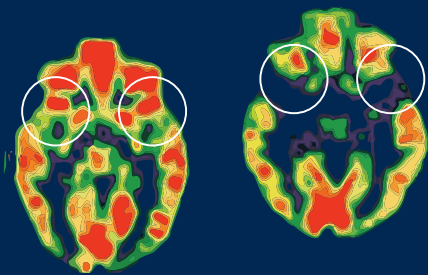


### The Evidence

A review by the *International Journal of Integrated Care* suggests that integrated hubs based in primary care settings and incorporating effective clinical, professional and organisational integration, including co-location, improves mental health outcomes for children experiencing adversity. Clinical integration includes case management, care focusing on client medical, psychological, and social needs, patient education and continuity of care.

International Journal of Integrated Care: Do Integrated Hub Models of Care Improve Mental Health Outcomes for Children Experiencing Adversity? A Systematic Review





### The Developing Brain

These scans show a typically developing brain (left), and the brain of a child exposed to neglect, trauma and abuse (right).

The circles highlight the 'frontal lobes' which are responsible for motor function, problem solving, spontaneity, memory, language, initiation, judgment, impulse control, and social and sexual behavior.

### Opportunities to Re-shape the Future: A Child's Brain Can Bounce Back

A child's brain that has been exposed to adverse childhood experiences reacts to the world with fear and this can have lifelong negative impacts.

However, the brain is at its most receptive and adaptable in the first 2000 days so we can rewire the neural pathways and give children the support and positive experiences they need to set them up for a fulfilling and positive life.

We need to employ the full range of protective factors for the child – nurturing strong relationships, positive experiences, good health and nutrition – and equitable access to quality services and supports for families, parents and children.

Dr H T Chugani. Your Child from birth to three

# Solutions

## The Two-Generation Approach

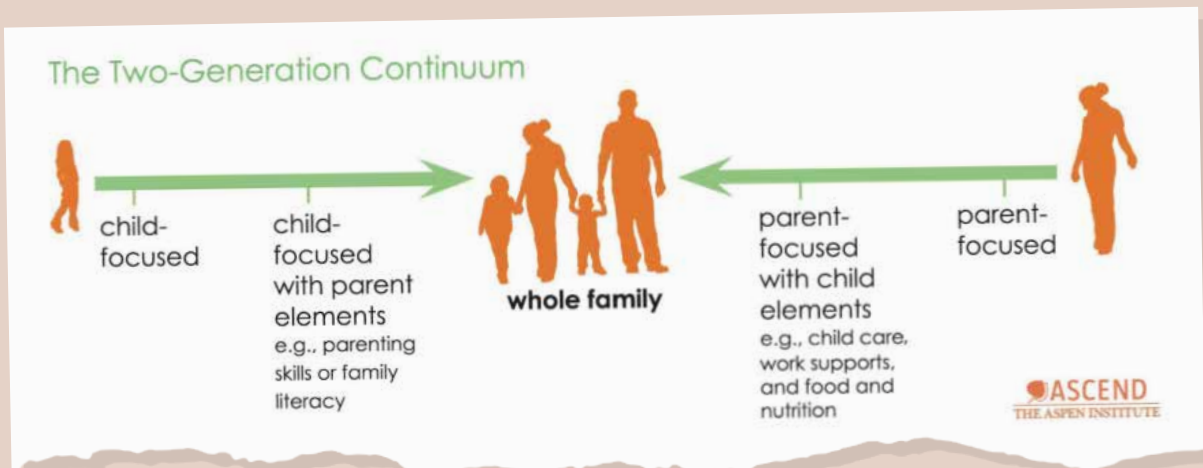
The Two-Generation Approach focuses on the needs of the parent and the child both together and separately. Responses focus on not only a core family violence or homelessness issue, but on preventing longer term impacts on the child.

Children need to be supported in their own right with trauma-informed, child-centred responses, not treated as an extension of the parent. Additionally, children will need longer term responses beyond the support period usually offered to people who are homeless or victims of domestic and family violence.

The Approach requires investment in a coordinated system of trauma-informed supports and services that will meet the needs of the family, the parent and the child. These services can buffer the impact of the trauma and stressors before the family is overwhelmed.

**Opposite:** Two generations, working together.

*Photography, Katie Bennett.*



### Child-focused

- Early learning, education and care
- Mental health and psychological support
- Physical health support
- Development screening
- Improvement in self-esteem and trust building

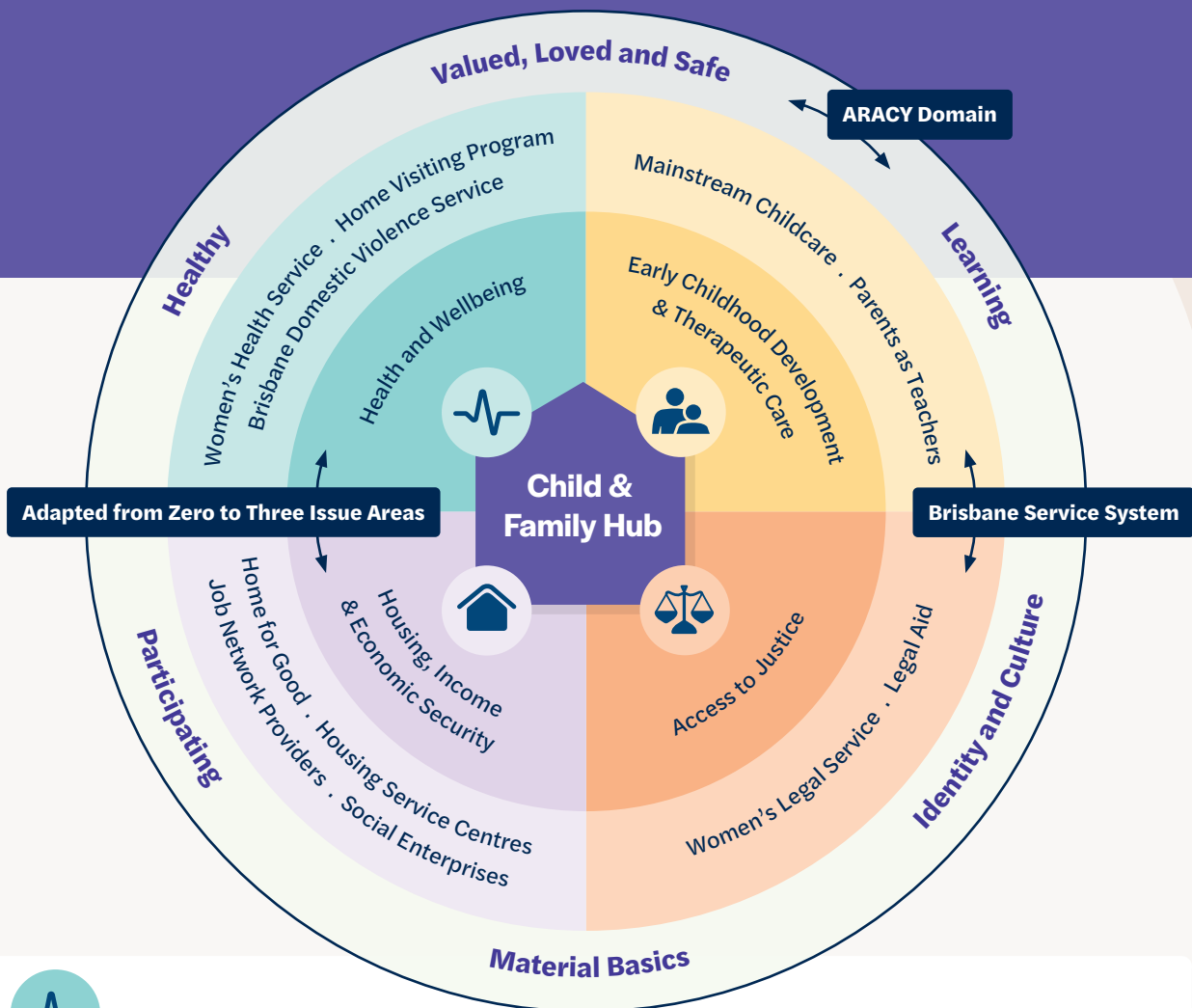
### Family Outcomes

- Safety and stability
- Nurturing and supportive relationships
- Accessing needed services
- Healthy
- Children meeting developmental milestones

### Parent-focused

- Stable housing
- Safety planning
- Parenting and family support
- Mental health support
- Employment, education and training
- Access to justice
- Therapeutic, family-based counselling
- Health and nutrition





## Health and Wellbeing

### Maternal and Infant Mental Health

Address mental health concerns of parents and promote good practices to prevent mental health issues developing in children.

- Maternal, infant and early childhood home visiting and screening
- Mental health and psychological support for parents
- Safe places for caring to support cognitive skills development and neurodiversity.

### Physical Health and Nutrition

Prioritise the health and wellbeing of the parent and child.

- connect with health services to respond to physical health issues and chronic disease
- Infant and parental health screening
- Drug and alcohol treatment and recovery
- Promotion of nutrition and food security
- Promotion of health lifestyles, including for pregnant women.

### Parenting and Family Support

Support parents to provide a positive and safe home environment.

- Support development of parenting skills and improve family functioning

- Support parents to understand early childhood development and help their children access the services the child needs
- Early intervention support
- Therapeutic family-based counselling
- Improve parent-child attachment
- Support engagement with child protection system.

### Safety and Security at home, in relationships and community

Promote and support safety in the home and in relationships.

- Establish safety plans and support decision-making that enables and maintains safety for the parent and children
- Promote effective domestic and family violence responses
- Safety planning for respectful and safe relationships.

### Connected to Community and Culture

Support identification of and connection to communities of choice.

- Access to peer supports
- Community connections playgroups
- Culturally appropriate responses.

# Solutions

## Two-generation focused system of coordinated, trauma-informed services

A service system that shapes better futures for children by responding to the adverse experiences that impact on their health and wellbeing in the first 2000 days.

Services are trauma-informed and coordinated, responding to the prevalence of poverty, childhood trauma for mothers, their partners and their children, domestic, sexual and family violence, homelessness

and mental health challenges. They provide positive experiences that mitigate the negative environment that has created adverse childhood experiences.

The system invests in age-appropriate services for children in their own right, understands and can respond to children's trauma, focuses on recovery and works collaboratively to support child and family.



### Housing, Income and Economic Security

#### Housing Stability and Security

Support access to stable, sustainable housing.

- Housing First for families, parents and children
- Access rental subsidies
- Increase access to more appropriate crisis and long-term affordable housing
- Provide supportive housing.

#### Income and Economic Security

Secure access to income.

- Advocate for access to income support and concessions (where eligible)
- Budget management
- Provide financial and material assistance

#### Employment, Education and Training

Support engagement with employment, education and training opportunities.

- Promote employment for parents to improve economic security and increase community connection.
- Offer employment and training opportunities through social enterprise
- Support attendance at education, training and work experience, including access to child care
- Actively engage with employment providers.



### Access to Justice

Promote access to legal representation and court support, and supports that respond to domestic and family violence.

- Legal advice and representation
- Domestic and family violence support
- Support in all courts: family, criminal and civil
- Child protection advocacy
- Education of courts and police



### Early Childhood Development and Therapeutic Care

Provide supports and opportunities for all children to learn and meet their child development goals.

- Home visiting programs
- Parents as Teachers
- Early learning programs, including in crisis
- Specialised and affordable care
- Childhood development screening and assessment
- NDIS readiness screening.

## Strategic Goals and the Service System

We want to be part of creating sustainable change and shape the future by:

**Working with others** to build a community and service system that responds to the prevalence of poverty, childhood trauma for adults and children, domestic, sexual and family violence, homelessness and mental health challenges and shape a better future.

**Ensuring positive experiences** in services and relationships to mitigate the negative environment that has created adverse childhood experiences.

**Creating and providing** the resources and environments that children and women as mothers need to remain together as a family safe and supported within their community.

**Breaking the cycle** of poverty and trauma by taking a Two-Generation Approach.

**Working collectively** to raise awareness of the structural inequalities that contribute to the poor outcomes we currently see.

### Goals for Programs and Services

We want to create networks and collaborations, for example through child and family hubs, that focus on the child, parent and family and in which we can learn how we can work more effectively as a system by:

**Creating** with children and their parents more positive, enriching experiences as part of our service system and community approach.

**Reducing** rates of homelessness for children and women as mothers through the Housing First Approach.

**Reducing** the impacts of adverse experiences and trauma effects on mothers and children such as domestic, family and sexual violence early in the lives of children through effective domestic violence responses.

**Promoting** improved health and nutrition, addressing mental health concerns and helping children meet their development goals.

**Providing** support to equitably and fairly access the justice system through legal representation and other assistance

**Preventing** unnecessary removal of babies and children under five into the child protection system by creating new interventions that are supportive, in the home and community, and in collaboration with parents – including through expanding the Parents as Teachers Approach and Maternal and Child Health Visiting.

### Goals for Children and Families

We focus on the child, parent and family by:

Being **responsive** to children under five years accompanying parents to our services to mitigate the early experiences of trauma, isolation and stress due to poverty, homelessness and domestic, sexual and family violence.

**Creating** safe relationships and safe places.

**Proactively** supporting families so that children and parents can have a life together and prevent the trauma of unnecessary removals of children into the child protection system.

**Creating** change so that women and children have a home and are safe, healthy and connected to family and community of their choice with resources to live, grow, learn and thrive together.



# Impact

## How do we know we are succeeding?

- ✓ Parents and children are safely together in stable and sustainable housing.
- ✓ Parents are nurturing, understand and thrive in their parental role and support their children to identify needs and access services.
- ✓ Parents and children are connected to their families and communities of choice.
- ✓ Children are ready for school and meeting their developmental goals.
- ✓ Parents and children have improved general health, are accessing health services and have a relationship with their General Practitioner (GP).
- ✓ Parents and children are accessing mental health services to support mental health and wellbeing.
- ✓ Parents understand the impact of alcohol and other drug use on the health and wellbeing of their children and themselves.
- ✓ Parents and children have safe relationships with others through professional, formal and informal networks.



## References

- <sup>1,2,3,4,5</sup> AIHW Specialist Homelessness Services 2021-22
- <sup>6</sup> Queensland Health Queensland Perinatal Statistics 2019
- <sup>7</sup> Queensland Dept of Education School Disciplinary Absences by student demographics
- <sup>8,9</sup> AIHW Family, domestic and sexual violence data in Australia
- <sup>10</sup> ABS Australia's Children: Infant and child deaths

MICAH PROJECTS 

(07) 3029 7000  
162 Boundary Street West End Q 4101  
info@micahprojects.org.au  
micahprojects.org.au