

**An exploration of the extent to which an  
Australian metropolitan service model for specialist  
(Level 2) Child and Family Health services can be  
implemented in diverse settings**

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Thesis submitted in fulfilment of the requirements for  
the degree of

**Doctor of Philosophy**

University of Technology Sydney  
Faculty of Health

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## CERTIFICATE OF ORIGINAL AUTHORSHIP

I, Deborah Anne Stockton, declare that this thesis is submitted in fulfilment of the requirements for the award of Doctor of Philosophy, in the School of Public Health, Faculty of Health at the University of Technology Sydney.

This thesis is wholly my own work unless otherwise referenced or acknowledged. In addition, I certify that all information sources and literature used are indicated in the thesis.

This document has not been submitted for qualifications at any other academic institution.

This research is supported by the Australian Government Research Training Program.

**Signature:** Production Note:  
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**Date:** 23<sup>rd</sup> August 2022

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## List of Abbreviations

|          |  |
|----------|--|
| ACCHO    | Aboriginal Community Controlled Health Organisation  |
| ACCHS    | Aboriginal Community Controlled Health Services  |
| ACEs     | Adverse Childhood Experiences  |
| AH&MRC   | Aboriginal Health and Medical Research Council   |
| CASCADES | Collaborative Adaptation of Service Models for Child and Family Health in Diverse Settings |
| CFH      | Child and Family Health  |
| CFIR     | Consolidated Framework for Implementation Research   |
| eMR      | Electronic Medical Record  |
| GP       | General Practitioner   |
| HREC     | Human Research Ethics Committee  |
| ICT      | Information Communications Technology  |
| LGA      | Local Government Area  |
| LHD      | Local Health District  |
| NGO      | Non-Government Organisation  |
| NSW      | New South Wales  |
| PAR      | Participatory Action Research  |
| PIS      | Participant Information Sheet  |
| PSOB     | Pro-Social Organisational Behaviour  |
| REGIS    | Research Ethics Governance Information System  |
| SDG      | Sustainable Development Goals  |
| SSA      | Site Specific Assessment   |
| USA      | United States of America   |
| UTS      | University of Technology Sydney  |
| VC       | Video-conference   |
| WCFI     | Wilder Collaboration Factors Inventory   |
| WHO      | World Health Organization  |

## Research Outputs associated with this Thesis

### Peer-reviewed Papers

1. **Stockton, D.**, Fowler, C., Debono, D., Travaglia, J. (2022). Development of a Framework for the Collaborative Adaptation of Service Models for Child and Family Health in Diverse Settings (CASCADES), *Journal of Child Health Care*.  
<https://doi.org/10.1177/13674935221129003>
2. **Stockton, D.**, Fowler, C., Debono, D., Travaglia, J. (2022). Adapting Child and Family Health Service Models for Rural and other Diverse Settings: a Modified Delphi Study to Identify Key Elements, *Health and Social Care in the Community*.  
<https://doi.org/10.1111/hsc.14052>
3. **Stockton, D.**, Fowler, C., Debono, D., Travaglia, J. (2021). World Health Organization Building Blocks in Rural Community Health Services: An Integrative Review. *Health Science Reports*. <https://doi.org/10.1002/hsr2.254>

### Book Chapters

1. Fowler, C. & **Stockton, D.** (2021), 'Child and Family Health Nursing' in *Nursing in Australia: Contemporary professional and practice insights*, eds Wilson, N., Lewis, P, Hunt, L & Whitehead, L. Routledge Publishers, London.

### Conference Papers and Presentations

1. **Stockton, D.** (2022), *Harnessing collaborative research approaches to adapt service models for rural communities*, 16<sup>th</sup> National Rural Health Conference, Brisbane, August 2022
2. **Stockton, D.** & DeBelin, A. (2021), *Reducing Stigma in Perinatal Mental Health: An Integrated Family Friendly Model for Rural Families*, The Australasian Marcé Society and Tresillian Conference: New Paradigms in Parenting, Perinatal Mental Health and Wellbeing, Virtual Conference, September 2021
3. **Stockton, D.** (2021), *Community Co-design: Harnessing Participatory Action Research and Modified Delphi approaches for service adaptation and innovation*, Consumer Health Forum Symposium, Virtual Symposium, March 2021
4. **Stockton, D.** (2020), *Reducing Stigma: An Integrated Family Friendly Model for Rural Communities*, Australian Rural and Remote Mental Health Symposium, Virtual Symposium, October 2020.
5. **Stockton, D.** & Mills, R. (2019), *From pilot to state-wide scale up: extending Tresillian's rural reach through partnership*, Proceedings of the 15th National Rural Health

Conference, editor Leanne Coleman, Hobart, Tasmania, 24-27 March 2019. Canberra: National Rural Health Alliance, 2019. ISSN: 1445 3363

6. **Stockton, D.** (2019), *Going Mobile: Tresillian 2U – The Early Years Parenting Service*, 8<sup>th</sup> Maternal Child and Family Health Nurses Australia Conference, International Convention Centre, Sydney, August 2019.
7. **Stockton, D. & Daggar, L.** (2019), *Shaping our response to address diverse needs - Developing a responsive, flexible service model*, 8<sup>th</sup> Maternal Child and Family Health Nurses Australia Conference, International Convention Centre, Sydney, August 2019.
8. **Stockton, D. & Mills, R.** (2017), 'Navigation, adaptation and collaboration: creating a path for rural service development', *Proceedings of the 14th National Rural Health Conference*, editor Leanne Coleman, Cairns, Queensland, 26-29 March 2017. Canberra: National Rural Health Alliance, 2017 (concurrent presentation and paper published in conference proceedings ISSN: 1445 3363).

## Media, Teaching and Other Communication

1. Stockton, D.A. & Mills, R. 2021, *Enhancing Local Rural Health Response through Participatory Action Research: Harnessing a Collaborative Co-design Approach to Inform Service Model Adaptation and Innovation*, National Rural Health Alliance, Canberra 2021, <<https://www.ruralhealth.org.au/partyline/article/tresillian-goes-rural-parents-and-children>>.
2. Submission to the NSW Government *Parliamentary Inquiry into health outcomes and access to health and hospital services in rural, regional and remote New South Wales*, December 2020.
3. UTS Media Release: *Lessons learned: Rural Healthcare - Collaborating with community and local stakeholders is essential to improving rural health services*, May 2021, <<https://www.uts.edu.au/about/faculty-health/news/lessons-learned-rural-healthcare>>
4. Impact Narrative: Delphi Panel Participants' Newsletter - *Adaptation of Child and Family Health Service Models for Diverse Settings study*. Distributed July 2021 (Appendix 11)
5. Co-development of a module section (including content informed by this research) and responses to questions on the Student Discussion Form for a core subject, 'Foundations of the Australian Health Care System (96337)' in the Postgraduate Health Services Management program, UTS. This subject is run 1-2 times/year and since its initial delivery in 2020, the enrolment numbers continue to increase. To date, 313 students have completed this subject since the module section was developed.
6. Three-Minute Thesis (3MT) presentations, UTS Research Students Forums, Autumn 2021 and 2022
7. Five-minute 3-poster presentations, UTS Research Students Forums 2017, 2019 (First Runner-Up), 2020 (First Runner-Up)

## Abstract

Community-based Child and Family Health (CFH) services work collaboratively with parents to support optimal child development and positive parent-child relationships so children can thrive. They play an integral role in the identification and response for children and families with increasingly complex developmental and psychosocial health needs. Inequity, however, in health and social outcomes is pervasive, with poorer outcomes identified in rural communities. An international call to action to address the health outcomes gap for those living in disadvantaged regions has been emphasised by the World Health Organization (WHO), highlighting the need to adapt interventions and develop contextualised service models for lower resourced settings.

This thesis describes doctoral research comprising of three discrete studies. The aim of the research was to explore the extent to which an Australian metropolitan service model for specialist (Level 2) CFH services can be implemented in rural and regional areas. A scoping study and an integrative review informed the three studies which were as follows: (i) Participatory Action Research (PAR) in a rural setting in New South Wales (NSW) Australia to review the fit of an established metropolitan CFH service model for local context; (ii) a Modified eDelphi Study to identify elements to be considered when adapting CFH service models for rural community contexts; and (iii) a second PAR study in a different rural community setting to test a draft framework to guide the adaptation of CFH service models. PAR and Delphi approaches were used to engage consumers and a range of key stakeholders to foster inclusivity and address the power differential that can occur between researchers and participants.

The results of the three studies informed the development of the framework for *Collaborative Adaptation of Service Models for Child And Family Health in Diverse Settings* (CASCADES Framework). The CASCADES Framework, which includes a toolkit of resources, uses the analogy of a waterfall, with the water cascading from one tier to another, to represent and support the iterative collaborative community co-design process.

This research identified that established specialist CFH service models can be implemented in diverse contexts, however scope for adaptation must be built into such service models. Flexibility and time are required to effectively engage, consult with and co-produce innovative and culturally safe service adaptations, drawing on community strengths while addressing local need. Research findings identified the benefits of community participatory co-design extend beyond the immediate service implementation to service sustainability, integration and community capacity building.