



# Discussion Paper Response

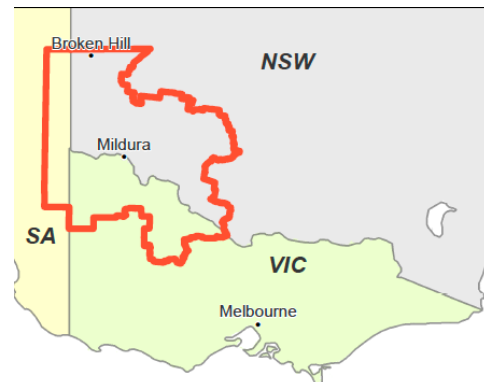
## Families and Children Activity: Review of Children, Youth and Parenting Programs

January 2025

## Executive Summary

As a major provider of community service programs across the Mallee region since 1979, Mallee Family Care (MFC) welcomes the opportunity to provide input to the review of Family and Children (FaC) programs undertaken by the Department of Social Services (DSS). Our experience serving culturally diverse regional communities across 165,841 km<sup>2</sup> of Victoria and New South Wales uniquely positions us to provide practical recommendations for program reform.

As a Facilitating Partner for Communities for Children (CfC) and provider of Children and Parenting Support (CaPS), we currently deliver comprehensive early intervention and family support services across the Mallee region. Our CfC program operates through strong community partnerships, managing subcontracted services while ensuring community voice through our committee structure. Through CaPS, we provide diverse parenting support services including our popular playgroup programs. Our integrated service approach allows us to connect families with additional supports when needed, whilst our regional presence enables us to adapt our delivery methods to meet local community needs. MFC is committed to continue to work with our partners and funding bodies to enhance these vital early intervention services for Mallee families and the benefit of likeminded services.



### Summary of Key Recommendations:

#### *Cultural Responsiveness*

- Move towards evidence-informed rather than strictly evidence-based approaches to enable cultural adaptation.
- Increase flexibility in program design and delivery to support First Nations and CALD communities.
- Enhance funding for transport, venues, and cultural liaison support.

#### *Service Delivery Model*

- Introduce more flexible delivery approaches including extended hours and hybrid models.
- Pursue stronger integrated service approaches supporting whole-of-family solutions.
- Improve funding models supporting transport, technology access, and workforce development.

#### *Access and Navigation*

- Develop comprehensive digital tools with real-time service information.
- Increase investment in community engagement and soft entry points.
- Enhance service coordination through shared referral systems and integrated hubs.

#### *Program Design*

- Review evidence based program requirements to enable local adaptation while maintaining quality.
- Support capacity building for local evaluation and promising practices.

- Strengthen partnership approaches between mainstream and Aboriginal community-controlled organisations.

Our recommendations are informed by extensive operational experience serving over 7,000 clients with more than 300 staff delivering 70+ programs across the region. They align with our strategic priorities of early intervention, addressing inequities, and building organisational capacity to meet evolving community needs. As a place-based service provider in regional areas, we understand the practical considerations needed for effective program reform and trust our insights will provide a good foundation for how they might succeed elsewhere.

## Responses to discussion questions

### Contemporary needs of families in Australia

#### **Question 1. With people from a CALD background less likely to access services, what (if any) change should be made to FaC children, youth, and parenting programs?**

MFC's substantial experience delivering CfC and CaPS services across the Mallee region has exposed key challenges in ensuring equitable access to services for CALD communities.

For instance, the Australian Institute of Family Studies (AIFS) requirement that 50% of program funding be allocated to evidence-based programs creates significant barriers for CALD families. Many evidence-based programs are designed for mainstream families, lacking the cultural adaptations needed to align with CALD parenting values and practises. This issue is particularly pronounced in regional areas, where transport barriers and limited venue availability often exacerbate inequities in service delivery. Additionally, centralised service delivery models often fail to reach isolated or newly settled families, thereby further entrenching barriers to access.

Beyond core program delivery, MFC staff regularly provide unfunded support to help families access other essential services, including housing, healthcare, and education. However, language services, culturally adapted resources, and intensive trust-building work require additional resources not currently reflected in existing funding models. Likewise, the complexity of supporting newly arrived families necessitates more comprehensive and culturally responsive approaches.

#### **Recommendations**

##### **1. Adopt evidence-informed approaches with co-design**


Moving toward evidence-informed approaches that are co-designed with CALD communities would allow programs to be culturally adaptable while maintaining integrity. This includes incorporating traditional cultural practises into parenting programs and recognising alternative family support methods aligned with CALD values.

##### **2. Increase flexibility in program design and funding**

Program design must account for practical barriers by supporting transport costs, venue access, and the provision of cultural liaison officers and interpreters. Funding flexibility should also enable wraparound family support beyond core program elements. Recognising the time required to build trust and relationships in CALD communities, particularly in regional settings, is critical to success.

##### **3. Strengthen place-based approaches**

Programs should reflect the unique needs of diverse communities by fostering partnerships with cultural organisations and supporting long-term engagement with CALD leaders.



These efforts would ensure services remain culturally appropriate and accessible, enabling better engagement and outcomes.

Successful engagement with CALD families requires flexibility in program design, adequate resourcing to address practical barriers, and culturally responsive service delivery. The current one-size-fits-all approach does not adequately meet the diverse needs of CALD families, particularly in regional and remote areas. By implementing these recommendations, FaC programs can better support CALD families and strengthen their community engagement and outcomes.

**Question 2. What (if any) change should be made to FaC children, youth and parenting programs to account for the different service needs and preferences of families?**

Contemporary families face increasingly complex challenges that existing FaC program structures often fail to address. Traditional nine-to-five service schedules exclude many working families, while rigid program requirements inadequately account for diverse family structures and cultural practises. Barriers such as transport difficulties, limited digital access, and short-term funding cycles further compound these issues, particularly for regional and remote families.

The growing diversity of Australian families underscores the need for flexible and responsive service delivery models. Current programs often struggle to meet the unique needs of blended families, grandparent carers, and culturally diverse communities, leaving families with complex needs to navigate fragmented systems with insufficient integration. Workforce challenges, including limited access to specialist training and the recruitment of diverse staff, further hinder the sector's ability to meet evolving needs.

**Recommendations**

**1. Adopt flexible service delivery models**

Service delivery must evolve to include both centre-based and outreach options, extended hours, and hybrid approaches that combine face-to-face and digital services. Longer funding cycles are essential to enable service providers to build trusting relationships with families and adapt programs to reflect the unique needs of their local communities.

**2. Shift toward integrated service models**


Programs should focus on whole-of-family approaches that connect services across age groups and needs. Developing shared assessment tools and coordinated case management systems will ensure a more unified response to complex cases. Additionally, investing in culturally safe practises—including staff training, hiring bilingual workers, and forming genuine partnerships with community organisations—will foster inclusivity and accessibility.

**3. Revise funding models for holistic support**

To address practical barriers, funding models must provide greater flexibility for transport assistance, technology access, and material aid. Resources should also support workforce development, including advanced training in trauma-informed practise, complex case management, and cultural safety. The recruitment and retention of specialist workers who reflect the communities they serve must also be prioritised.

**4. Prioritise service integration**

Strengthened referral pathways and collaborative practises are essential to improve service accessibility and effectiveness. Adequate structural and financial support must be provided to build and sustain partnerships that enhance service integration and foster long-term community and sector engagement.



MFC firmly believes that successful program adaptation requires meaningful consultation with families and communities, backed by sufficient resources to implement changes effectively. These recommendations will improve access and outcomes for families while enabling FaC programs to deliver more sustainable and responsive services tailored to the needs of diverse communities.

**Question 3. What changes (if any) could be made to increase awareness and improve navigation of available supports for families?**

Awareness of available services continues to be a significant barrier for many families. Traditional communication methods often fail to reach those most in need, particularly CALD communities and families in regional areas. Variability in digital literacy further limits access, while outdated and difficult-to-navigate service directories exacerbate the issue. Families frequently report confusion regarding eligibility criteria and referral processes, which deters them from seeking support.

Service navigation is another critical challenge, especially for families experiencing multiple stressors. Many must repeatedly share their stories with different providers, navigate various intake processes, and manage competing waiting lists. These inefficiencies often lead to disengagement, particularly for families with limited English proficiency, low literacy, or complex needs. MFC's adoption of a 'no-wrong door' approach demonstrates the value of wraparound support that ensures families receive the help they need regardless of their entry point. However, a lack of coordinated information-sharing between services creates inefficiencies and gaps in support.

Privacy requirements, though essential, further complicate service coordination, while insufficient resources for soft entry points and engagement activities limit opportunities for early intervention and prevention.

**Recommendations**

**1. Develop comprehensive digital tools**

Digital platforms providing real-time service information and availability must be developed. These tools should include multiple language options, accessibility features, and both web and mobile interfaces. To ensure equitable access, digital solutions should be complemented by a central intake and referral service staffed by skilled workers who offer personalised navigation support.

**2. Increase investment in community engagement**


Awareness can be improved by funding community liaison positions, particularly in CALD communities, to build trust and disseminate information. Supporting informal networks that families often rely on for information and creating soft entry points will encourage engagement with formal services and improve early intervention.

**3. Enhance service coordination**

Better service integration is critical to reducing barriers. This includes implementing shared referral systems, universal screening tools, as well as establishing clear referral pathways and supporting warm referral processes to ensure families transition smoothly between services.

**4. Streamline administrative systems**

Duplication in information collection and access processes must be reduced through common intake forms, shared client management systems, and coordinated waitlist management. These changes will simplify access for families and improve efficiency for service providers.



MFC's experience with the 'no-wrong door' approach highlights the importance of combining system-level changes with localised, community-driven solutions. By investing in digital tools, community engagement, service coordination, and streamlined administrative systems, FaC programs can significantly improve families' ability to navigate support services. These changes will lead to better access, earlier intervention, and more coordinated service delivery, ultimately resulting in stronger outcomes for families across Australia.

## The Community Sector Partnership Framework

**Question 4. Apart from the issues outlined above, are there any other changes to FaC children, youth and parenting programs that should be considered to strengthen the community sector? (If yes, please specify.)**

A critical factor in delivering FaC children, youth, and parenting programs is the importance of consistent relationships with DSS Grants Managers. These relationships enhance program outcomes by fostering a deeper understanding of local contexts and enabling more effective service delivery.

Outcome measurement approaches also need improvement to go beyond the limitations of DEX reporting. Innovative evaluation frameworks that capture children's voices and comprehensively assess program impacts are essential. MFC's internal Outcomes Framework already provides richer analysis aligned with the Early Years Strategy, setting a benchmark for sector-wide practises.

The dual focus of the CfC Facilitating Partner role—balancing community development and subcontracting programs—presents unique challenges. Subcontracted services often require significant support in areas like data collection and evaluation, highlighting the need for additional capacity building.

### Recommendations

#### 1. Strengthen DSS grants manager relationships

Mechanisms should ensure continuity and regular engagement between service providers and DSS, including structured handover processes when Grants Managers change, regular consultation mechanisms, and consistent communication channels. A shared understanding of local contexts and program challenges must be prioritised to strengthen collaboration and program outcomes.

#### 2. Enhance evaluation frameworks to elevate children's perspectives


Evaluation methods must include tools that are age-appropriate, creative, and interactive to gather meaningful feedback from children. Approaches should balance quantitative and qualitative methods, be culturally appropriate, and directly align with Early Years Strategy outcomes. It is also essential that the voice of the child is highlighted as part of the evaluation process. By doing so, the sector can ensure evaluations measure the true impact of programs on children and families.

#### 3. Increase capacity building for partner organisations

To improve subcontractor capacity, targeted training in DEX reporting and evaluation should be offered alongside user-friendly resources, mentoring programs, and communities of practise for shared learning. Establishing clear quality assurance processes will further strengthen the ability of subcontracted services to meet data collection and reporting standards.

#### 4. Share and align internal evaluation frameworks

The sector would benefit from sharing successful evaluation approaches and documenting effective practises. Collaborative learning mechanisms should be created to enable



organisations to refine their methodologies and align their internal frameworks with government reporting requirements, maintaining a focus on continuous improvement.

Implementing these recommendations would strengthen program delivery across the community sector and enhance the measurement of meaningful outcomes while elevating the voice of the child. However, successful implementation requires appropriate resourcing and support from funding bodies to ensure ongoing sustainability. By addressing these gaps, FaC programs can deliver stronger, more impactful services to the communities they serve.

## Measuring What Matters and the Early Years Strategy

### **Question 5. What changes (if any) should be made to FaC children, youth and parenting programs to help achieve the outcomes set out in the Early Years Strategy?**

Achieving the outcomes outlined in the Early Years Strategy requires more meaningful incorporation of children's voices into both program delivery and evaluation. Current approaches often fail to adequately reflect children's perspectives, limiting their influence on service development and outcome measurement. Strengthening mechanisms to involve children in shaping services is critical to aligning FaC programs with the Strategy's goals.

Resource allocation also needs to be reviewed to ensure developmentally appropriate service delivery. Insufficient funding for essential items such as age-appropriate toys, craft materials, and child-sized furniture impacts the quality of early years programs. Additionally, venue accessibility has emerged as a growing challenge, with increased restrictions, compliance requirements, and operational costs driving up venue charges. The lack of in-kind venue support, which was common pre-COVID-19, has placed additional financial strain on services.

Transportation remains a key barrier for rural and remote communities where limited public transport restricts access to programs. MFC's successful inclusion of minibus funding in the Mildura CaPS grant has delivered tangible benefits of transport support in facilitating program engagement. More flexibility in delivery methods and regional adaptation is needed to meet the diverse needs of families across Australia.

### **Recommendations**

#### **5. Incorporate children's voices**

Strengthen mechanisms for incorporating children's perspectives through child-friendly feedback processes, inclusion in program design, and development of appropriate evaluation frameworks. Staff training in gathering and interpreting children's input will ensure their voices meaningfully inform program development and delivery.

#### **6. Review resource allocation**

Program funding should cover essential developmental resources, including age-appropriate toys, craft materials, and child-sized furniture. It must also address venue costs and compliance requirements, transportation support (particularly in rural and remote areas), and adequate staffing to maintain high-quality service delivery.


#### **7. Address venue accessibility challenges**

Partnerships with venue providers should be developed to reduce restrictions and ensure spaces meet early years program needs. Supporting venue compliance costs and considering transport accessibility in venue selection will further improve access for families.

#### **8. Enhance program flexibility**

Greater flexibility in program design is needed to support local adaptation, encourage innovative engagement approaches, and ensure cultural appropriateness. Regional





variations in needs and resources must also be accommodated to maximise program effectiveness.

MFC strongly believes these adjustments will enhance the sector's capacity to deliver on Early Years Strategy outcomes. By addressing critical barriers such as resource limitations, venue accessibility, and transportation, FaC programs can ensure they remain accessible, effective, and aligned with the needs of families—particularly those in regional and remote areas.

## **Australia's Disability Strategy and the National Autism Strategy**

### **Question 6. What changes (if any) should be made to FaC children, youth and parenting programs to improve the access and inclusion of parents/children with developmental concern or disability?**

Access and inclusion remain critical challenges for families affected by disability or developmental concerns. In regional areas, families face lengthy waitlists and isolation due to limited access to specialist support services. While MFC provides programs to support these families, current resourcing often falls short of meeting their complex needs. Parents may also hesitate to participate in mainstream programs due to concerns about managing behaviours or a lack of confidence, further exacerbating their sense of exclusion.

Program reporting often understates the prevalence of disability and developmental concerns. Parents frequently choose not to disclose these issues due to fears of labelling, stigma, or differing interpretations of disability. As such, the data presented in the discussion paper may not fully reflect the severity of the situation. Additionally, existing funding models create tensions between the need for inclusivity and the limited resources available to provide specialised support for multiple cohorts, placing strain on staffing and program capacity.

### **Recommendations**

#### **1. Enhance workforce capacity**

Specialist training in disability support should be prioritised, particularly in regions with limited access to specialist services. This training should focus on creating welcoming environments and improving participation for families managing disability or developmental concerns.

#### **2. Review funding models**

Funding should better reflect the true costs of inclusivity, encompassing additional staffing, specialised equipment, and suitable venues. Resources must be allocated to ensure programs can effectively support multiple cohorts while maintaining high-quality service delivery.

#### **3. Strengthen service integration**


Greater cooperation between FaC programs and specialist disability services is essential to improve pathways of support and reduce isolation for affected families. This includes developing clear referral processes and fostering collaborative support arrangements to ensure seamless service delivery.

#### **4. Develop nuanced identification and reporting practices**

More sensitive approaches to identifying and recording disability and developmental concerns are needed. These practises must consider parents' perspectives and concerns while ensuring that families receive appropriate support without fear of stigma or labelling.

Implementing these recommendations would significantly enhance FaC programs' ability to create inclusive, supportive environments for families managing disability or developmental





concerns. By addressing these challenges, programs can also better meet the diverse needs of communities and deliver more equitable and effective services.

**Question 7. What type of services are preferred by parents or carers with disability or by children with developmental concern or disability?**

Parents and carers of children with developmental concerns or disabilities often prefer services that offer accessibility, understanding, and specialised support. These preferences are particularly pronounced in rural areas, where families face extensive waitlists and isolation due to limited access to specialist services. MFC's program delivery highlights that families value environments where they feel supported and understood, free from judgment about behavioural challenges or their own confidence levels.

Many parents nonetheless express reluctance to engage with mainstream playgroups due to concerns about managing their children's behaviours and fear of stigma. Additionally, the underreporting of disability and developmental concerns suggests that families may prefer services that do not require formal disclosure or labelling. These findings underscore the importance of creating safe and inclusive environments where families feel comfortable discussing their needs without fear of negative consequences.

The current service environment often fails to meet these preferences, particularly in rural and remote areas, due to resource constraints and limited specialist support. Addressing these gaps is critical to strengthening engagement and improving outcomes for families.

**Recommendations**

**1. Combine specialised support with inclusive environments**

Develop programs that provide targeted support while fostering welcoming atmospheres that avoid stigmatisation and labelling. Inclusive environments will encourage participation and reduce the barriers associated with disclosure or diagnosis.

**2. Incorporate flexibility in service delivery**

Programs should accommodate varying needs and capabilities by offering both structured and unstructured activities. Flexible approaches will ensure families can engage in ways that best suit their unique circumstances.

**3. Ensure consistent, skilled staffing**

Services must maintain consistent staffing with expertise in disability and developmental concerns. Ongoing professional development should be provided to enhance staff skills and understanding, ensuring high-quality support for families.

**4. Establish long-term support models**

Long-term interventions should replace short-term models, particularly in rural areas where specialist services are scarce. Sustained support will help families navigate challenges over time and reduce the impact of limited-service availability.

**5. Create safe spaces for open dialogue**

Programs should foster environments where families feel safe discussing their needs and concerns without the requirement for formal disclosure or diagnosis. This will encourage engagement and better align services with families' preferences.

Understanding and responding to the service preferences of families affected by disability or developmental concerns is essential for improving engagement and outcomes in FaC programs. By addressing these priorities, services can become more inclusive, accessible, and supportive – ensuring families feel valued and empowered in their interactions with the community sector.



## National Agreement on Closing the Gap

### **Question 8. What changes (if any) should be made to FaC children, youth and parenting programs to strengthen outcomes for First Nations children?**

Strengthening outcomes for First Nations children in FaC programs requires recognition of the complex service delivery landscape and the critical partnerships between Aboriginal Community Controlled Organisations (ACCOs) and mainstream providers. Many First Nations families appropriately choose ACCO-run services due to their cultural alignment, while others prefer accessing mainstream services, emphasising the importance of maintaining service choice.

The relationship between ACCOs and mainstream providers, such as MFC, highlights both challenges and opportunities. ACCOs often deliver culturally appropriate services, while mainstream providers complement this work by offering additional support and backup service delivery—frequently without dedicated funding. Successful outcomes depend on respectful partnerships that honour families' choices and acknowledge the complex efforts required for effective service delivery. However, current target-setting and reporting frameworks do not adequately capture these dynamics, failing to reflect the true nature of service collaboration and community preferences.

#### **Recommendations**

##### **1. Revise reporting frameworks and targets**

Reporting systems should better acknowledge the preferred use of ACCO services by many families, recognise the informal support provided by mainstream services, and reflect the associated relationships between providers. This would ensure that reporting accurately represents the service landscape.

##### **2. Strengthen partnership approaches**

Partnerships between ACCOs and mainstream providers should be formalised through clear protocols for shared service delivery and adequate resourcing for partnership activities. Recognising the complementary roles of both sectors will foster more effective collaboration.

##### **3. Enhance service choice**

Maintaining culturally safe mainstream options is vital for families who prefer these services. Warm referral pathways between ACCOs and mainstream providers, along with flexible service delivery models, will ensure families have access to services that best meet their needs.


##### **4. Support capacity building across sectors**

Capacity building should include resource sharing between ACCOs and mainstream providers, joint professional development opportunities, and cooperative approaches to addressing service delivery challenges. These initiatives will strengthen both sectors' ability to support First Nations children effectively.

##### **5. Improve funding models**

Funding frameworks must recognise the informal support often provided between services, support genuine partnership activities, and enable flexible responses to community needs. This will ensure both ACCOs and mainstream providers have the resources required to deliver high-quality outcomes.

Implementing these recommendations will strengthen the complementary roles of ACCOs and mainstream services, leading to better outcomes for First Nations children and families. By



maintaining service choice, fostering partnerships, and building sector capacity, FaC programs can ensure culturally appropriate and effective support for First Nations communities.

**Question 9. How could the number of ACCOs delivering FaC children, youth and parenting programs be increased within existing funding, especially in First Nations focused communities?**

Expanding the number of ACCOs delivering FaC children, youth, and parenting programs requires a thoughtful evaluation of existing service delivery patterns and the relationships between ACCOs and mainstream providers. Current challenges include mainstream organisations struggling to meet First Nations engagement targets while respecting families' choices to access ACCO services, and the need for operational support from mainstream providers, which often goes unfunded. Additionally, some families prefer non-ACCO services, underscoring the importance of maintaining service choice.

For example, MFC has successful partnerships with two ACCOs delivering child and family programs. While these ACCOs provide high-quality, culturally appropriate services, they sometimes rely on operational support from MFC, which is often provided without dedicated funding. This dynamic highlights the need to formalise and resource such partnership arrangements.

**Recommendations**

**1. Revise funding models**

Funding frameworks should formally recognise and resource partnership arrangements between ACCOs and mainstream providers. This includes supporting both ACCO and mainstream service delivery while enabling flexible responses to community needs.

**2. Strengthen existing partnerships**

Clear agreements about roles, responsibilities, and shared resources should be established to strengthen cooperation. Funding for joint activities and capacity building should be provided to ensure sustainable partnerships.

**3. Support ACCO sustainability**

Investment in ACCO governance, operational systems, and capacity building is critical to support their growth and sustainability. Dedicated funding for these needs will ensure ACCOs can continue to deliver high-quality, culturally appropriate services.

**4. Maintain service choice**

Both ACCO and mainstream delivery options should be supported to ensure families can access services that align with their preferences. Warm referral pathways between services should be facilitated to support families transitioning between providers.

**5. Improve reporting frameworks**

Reporting systems should acknowledge partnership delivery models, recognise informal support arrangements, and accurately reflect actual service usage patterns. This will provide a more comprehensive understanding of the service landscape.

These recommendations support the sustainable growth of ACCOs delivering FaC programs while preserving the valuable partnerships between ACCOs and mainstream organisations. This approach ensures that service delivery remains inclusive, culturally appropriate, and responsive to community preferences, supported by appropriate funding and frameworks.

**Question 10. Considering the key elements for the successful transition listed above, are there any other elements that would be important? (If yes, please specify.)**

Expanding ACCO-delivered FaC programs requires addressing additional considerations beyond those identified in the SASF project and Families Australia report. Key challenges include the limited proportion of ACCOs currently delivering services (1 in 25 for CaPS and FMHSS), the impact of transition processes on existing service relationships, workforce development and retention needs, operational capacity building, and ensuring service continuity during transitions.

MFC acknowledges and supports current initiatives aimed at improving outcomes for First Nations children, including the establishment of a National Commissioner, community playgroups, and the Safe and Supported First Action Plan. However, building on these efforts is essential to drive meaningful progress.

**Recommendations**

**1. Build on existing partnerships**

Recognise and strengthen effective synergies between ACCOs and mainstream organisations. Support operational partnerships to maintain valuable service delivery relationships while enhancing the collective capacity of the sector.

**2. Strengthen workforce development**

Invest in cultural safety programs, staff transition support, and strategies to retain community relationships and corporate knowledge. Targeted ACCO capacity building should be prioritised to ensure a skilled and sustainable workforce.

**3. Ensure service continuity**

Clear handover processes must be established to minimise disruption during transitions. Maintaining existing service relationships, where preferred by communities, and developing backup arrangements will help ensure uninterrupted support for families.

**4. Support operational capacity**

Dedicated funding for governance development, administrative and compliance support, risk management frameworks, and culturally appropriate quality assurance systems is critical. These investments will strengthen ACCOs' operational foundations and enable them to deliver high-quality services.

**5. Design sustainable funding models**

Develop funding models that reflect the true costs of service delivery, support partnership arrangements, enable flexible responses to local needs, and provide long-term funding security. Sustainable funding is essential for the stability and growth of ACCO service delivery.

The additional measures listed above would complement the SASF and Families Australia recommendations while supporting the government's commitment to increasing ACCO service delivery. This approach acknowledges the complexities of service transition and prioritises the maintenance of quality outcomes for children, families, and communities.

**Safe and Support and National Plan to End Violence**

**Question 11. What changes (if any) should be made to FaC children, youth and parenting programs to provide supports in a culturally appropriate and trauma-informed way?**

FaC programs play a pivotal role in supporting families experiencing complex trauma and family violence, often serving as the first point of disclosure for many families. This is particularly true for First Nations women and families, who are significantly overrepresented in trauma-related

statistics due to the compounding effects of historical and intergenerational trauma, systemic disadvantage, and family violence. Programs therefore must be equipped to respond appropriately, ensuring services are both culturally safe and trauma informed.

#### **Case Study: Building Connections Through Mallee Family Care Playgroup**

A young single mother began attending the Mallee Family Care Playgroup about a year ago, seeking support and connection after leaving a family violence situation. At the time, her child was approximately 18 months old, and both mother and child were experiencing significant isolation.

The playgroup offered a welcoming environment where the mother and her child could engage with other families. The mother shared that these sessions provided her child with opportunities to interact with peers, which was something they had been missing. Over time, she noticed her child becoming more comfortable in social settings, showing improved confidence and interaction during playgroup activities.

The playgroup also became a place where the mother felt safe enough to open up about her experiences. During private conversations with the Social Worker, she discussed the challenges she had faced and received practical advice on child development and accessing services that could support her daughter's growth. The Playgroup Facilitator and Social Worker worked together to connect her with universal services that were relevant to her needs.

Reflecting on her experience, the mother shared:

"I am just so grateful for you guys. You were the ones who helped us out and improved my child's socialising. I couldn't be more grateful. You know what my child was like before coming to playgroup. I'm so grateful for you guys."

This case illustrates how the playgroup provided both a structured environment for her child's development and a supportive space for the mother to build connections and access resources. Through regular attendance, this family was able to overcome isolation and gain tools for moving forward.

Despite their critical role as evidenced in the case study, service delivery challenges persist. Families accessing such programs often present with multiple, intersecting complexities that require nuanced and holistic support. Limited capacity in existing services, inconsistent approaches to family violence screening, and the impact of physical spaces on accessibility further exacerbate these challenges. Additionally, the need for stronger cultural safety measures is evident, with many services falling short of adequately addressing the unique needs of First Nations families.


#### **Recommendations**

##### **1. Strengthen cultural safety**

Dedicated funding should be provided for cultural awareness training, the employment of First Nations workers, and the development of culturally appropriate resources. Regular cultural audits are essential to ensure services remain respectful and responsive to cultural needs.

##### **2. Enhance trauma-informed practice**

Comprehensive staff training in trauma-informed principles should be implemented, alongside support for staff managing vicarious trauma. Regular practise reflection and



integration of trauma-informed approaches across all programs will improve the quality of care for families.

**3. Implement consistent family violence screening**

Standardised family violence screening using tools such as MARAM-style questions should be applied across all programs. Recognising safe entry points, such as playgroups, will enable earlier identification and intervention for families experiencing violence.

**4. Develop integrated service models**

Where appropriate, co-location with family violence services, the creation of welcoming and culturally safe spaces, and formalised partnership arrangements will facilitate seamless and effective support for families. These integrated models will enhance accessibility and reduce barriers to engagement.

**5. Build workforce capacity**

Regular training, clinical supervision, and resources for complex case management are critical to strengthening workforce capacity. Partnerships with specialist services should be fostered to provide additional expertise and support for staff.

These recommendations will transform FaC programs into more effective early intervention points for families experiencing trauma and violence. By embedding cultural safety, strengthening trauma-informed approaches, and implementing consistent family violence screening, programs can better support families who may not otherwise access specialist services.

**Question 12. Is there a way to improve how FaC children, youth and parenting programs work with and refer families to specialised tertiary supports?**

While FaC programs increasingly adopt culturally appropriate and trauma-informed practises, gaps remain in the integration of these approaches into referral pathways for tertiary supports. Families frequently encounter barriers such as limited service availability, disjointed case management, and a lack of formalised ties between FaC programs and specialist providers. These challenges reduce the effectiveness of referrals and the likelihood that families will receive timely, appropriate support.

**Recommendations**

**1. Strengthen referral pathways with specialist services**

Develop clear and reliable referral pathways that ensure guaranteed access to support for families in crisis. Priority pathways should be established for first-time disclosures of violence and families with complex needs, reducing delays and uncertainty in accessing tertiary supports.

**2. Integrate trauma-informed and culturally safe practices in referral processes**

Extend trauma-informed and culturally safe principles to referral pathways by providing comprehensive training for staff. This includes developing warm referral processes and creating supportive environments for families transitioning to specialist services.

**3. Enhance collaboration through formal partnerships**

Establish formal agreements between FaC programs and specialist providers to facilitate shared assessment frameworks, coordinated case management, and ongoing communication. These partnerships will improve continuity of care and ensure families are supported holistically.



#### **4. Co-locate specialist services within FaC programs**

Co-location of family violence and other specialist services within FaC programs will reduce barriers to access, particularly for First Nations and CALD families. Welcoming, culturally safe spaces will further enhance engagement and trust.

#### **5. Resource collaborative practice and pathway development**

Allocate funding for joint service delivery initiatives, including shared training opportunities, development of integrated referral tools, and capacity building for complex case management. Adequate resourcing is critical to ensure effective collaboration and sustainable pathways.

Strengthening referral pathways between FaC programs and specialist tertiary supports is vital to improving outcomes for families with complex needs. By prioritising collaboration, trauma-informed practises, and culturally safe approaches, FaC programs can enhance their role as critical entry points to specialist support.

### **Gender Equality**

#### **Question 13. What changes (if any) should be made to FaC children, youth and parenting programs to improve inclusiveness for all parents, carers and children, regardless of family structure, gender or sexual identity?**

FaC children, youth, and parenting programs must evolve to better address the diverse needs of Australian families, ensuring inclusiveness for parents, carers, and children regardless of family structure, gender, or sexual identity. Contemporary family dynamics, including those of rainbow families and gender-diverse individuals, are not adequately reflected in current program designs or data collection systems. Additionally, strategies to engage fathers and manage differing perspectives on gender equality remain underdeveloped, limiting the effectiveness of inclusivity efforts.

Challenges include gaps in father engagement, limited staff skills in navigating diverse perspectives on gender, restrictive data collection categories that fail to capture the diversity of rainbow families, and inconsistent training on inclusive practises. Addressing these shortcomings is essential for ensuring that FaC programs genuinely welcome and support all families.

#### **Recommendations**

##### **1. Enhance workforce development**

Provide specialised training in father engagement strategies, skills for managing conflicting viewpoints, and promoting gender equality principles. This training will strengthen staff confidence and ensure programs are more inclusive and effective.

##### **2. Reform data collection systems**


Update data collection systems to move beyond binary male/female/other categories. More comprehensive data will better reflect family diversity and inform program planning to meet the needs of rainbow families and gender-diverse individuals.

##### **3. Develop targeted recruitment strategies**

Prioritise the recruitment of staff with lived experience and expertise in engaging fathers and supporting LGBTQIA+ families. This will enhance the program's ability to connect with and understand the needs of diverse family structures.

##### **4. Update program materials and intake processes**





Ensure all program materials and intake forms use inclusive language that reflects diverse family structures and avoids assumptions about parenting roles. This update will signal inclusiveness and create a more welcoming environment for all families.

#### **5. Build capability for respectful discussions**

Equip staff with the skills to facilitate respectful and constructive discussions about gender and family diversity. Clear organisational commitments to equality and inclusion should underpin these efforts, ensuring consistency in practise.

By addressing these challenges, FaC programs can better understand and respond to the needs of diverse families. These improvements will enhance staff confidence in managing complex conversations about gender and family diversity while embedding inclusive practises throughout service delivery. Strengthened workforce capabilities, updated data collection, and inclusive program materials will position FaC programs to genuinely welcome and support all families in an equitable and respectful manner.

#### **Question 14. To improve delivery against the Working for Women Strategy, what changes might help increase men's engagement with parenting programs? And what changes might increase gender norms around caring?**

Targeted changes are essential to increase men's engagement with parenting programs and challenge traditional gender norms around caring responsibilities. Current service approaches often struggle to effectively engage fathers, hindered by limited staff training, inflexible program delivery, workplace cultures that discourage men's caring roles, and inadequate data collection systems that fail to capture the diversity of family structures and caring arrangements.

While programs supporting gender diversity and inclusion (discussed in question 13) lay a foundation, additional steps are needed to specifically address men's participation in parenting roles and broader societal attitudes towards gender and caregiving.

#### **Recommendations**

##### **1. Enhance workforce development**

Provide specialised training for staff to develop strategies for engaging fathers and facilitating conversations about gender roles. This training should focus on promoting equality principles while recognising the unique challenges and contributions of fathers in caregiving.

##### **2. Reform program delivery to accommodate working parents**


Programs should offer flexible session times, including evenings and weekends, to better fit the schedules of working fathers. Father-specific content and peer support options, coupled with increased male representation in facilitation roles, will create a more inclusive and appealing environment for men. Outreach through workplaces and community groups should also be prioritised to reach more fathers.

##### **3. Strengthen workplace partnerships**

Engage with employers to advocate for family-friendly policies, including flexible work arrangements and access to parental leave without stigma. Programs can also promote positive examples of involved fatherhood and work with organisations to challenge workplace cultures that discourage men from embracing caring roles.

##### **4. Update data collection approaches**

Improve data collection systems to capture diverse caring arrangements, track father engagement patterns, and measure program effectiveness across different family



structures. This information will inform targeted strategies to enhance men's participation and assess progress over time.

Implementing these recommendations will help FaC programs increase father engagement while fostering broader cultural shifts around gender norms and caring responsibilities. By addressing practical barriers, enhancing workforce capabilities, and partnering with workplaces to challenge traditional expectations, FaC programs can empower men to take on more active parenting roles. These changes will not only support individual families but also contribute to long-term societal progress towards gender equality in caregiving.

## Place-based approaches and community partnerships

**Question 15. To strengthen community-led partnership in the CfC program, should CfC committees provide guidance across all CfC activities? Should any other changes be made to strengthen community-led partnerships in the CfC program?**

The success of the CfC program relies on balanced partnerships that respect both community leadership and Facilitating Partner (FP) responsibilities. While CfC committees play an essential role in providing guidance, their functions must complement existing governance frameworks rather than impose universal changes that may disrupt effective local arrangements. Flexibility is critical to supporting community-led partnerships in ways that reflect diverse local needs and contexts.

Challenges include proposals for expanded committee oversight of operational matters, such as FP staffing and compliance, which can conflict with FPs' contractual obligations. Mandatory funding splits, such as the suggested 30/70 model, fail to account for FP operational requirements and local partnership dynamics. These approaches risk creating unnecessary administrative burdens and undermining established, successful arrangements.

### Recommendations

#### 1. Maintain flexible funding arrangements

Ensure funding structures allow FPs to adequately resource operational requirements, support community partner capacity, and reflect local contexts. Flexibility is crucial to sustaining effective partnerships and enabling seamless program delivery.

#### 2. Strengthen existing governance frameworks

Build on current governance structures, which already support clear decision-making processes and community input. Effective Terms of Reference should be respected, and additional administrative layers avoided unless demonstrably necessary.

#### 3. Recognise the FP coordination role

Acknowledge FPs' critical coordination responsibilities, including managing data reporting requirements, supporting community partners, and ensuring program compliance. Adequate resourcing for these roles is essential to maintaining program effectiveness.

#### 4. Enable locally appropriate partnership models

Support locally tailored partnership arrangements that avoid imposing one-size-fits-all requirements. Focus on fostering genuine community leadership while preserving FPs' ability to deliver programs effectively and meet their contractual obligations.

Rather than expanding committee roles universally, CfC program improvements should focus on enhancing existing governance structures and respecting the diverse needs of local communities. By maintaining flexibility and building on successful partnerships, the program can strengthen its community-led focus while ensuring effective and accountable service delivery.

**Question 16. Are there other changes that could be made to the CfC program, which build on existing strengths to improve delivery against the Working Together Agreement commitments?**

Building on the existing strengths of the CfC program requires recognising the effectiveness of established governance and decision-making structures in many locations. While some communities may benefit from targeted enhancements, a universal approach risks undermining successful partnerships and operations. Local flexibility remains key to delivering programs effectively against the commitments of the Working Together Agreement.

Assumptions that current arrangements are universally ineffective have led to proposals for mandatory changes, such as expanded committee oversight of operational matters and prescribed funding splits. These proposals fail to account for the operational realities and responsibilities of Facilitating Partners (FPs), who hold contractual accountability for program delivery.

**Recommendations**

**1. Recognise existing governance strengths**

Acknowledge that many CfC programs operate effectively with robust Terms of Reference and clear decision-making processes. Introducing additional formal partnership agreements may add unnecessary complexity without tangible benefits.

**2. Maintain an appropriate division of responsibilities**

Ensure FPs retain responsibility for operational groundwork, including staff management, compliance, and data reporting. Committees should focus on strategic oversight, with FPs presenting well-considered options for decision-making. This division respects FPs' contractual obligations while preserving community input.

**3. Support FPs' coordination role**

Provide sufficient resources to enable FPs to fulfil their coordination responsibilities effectively. This includes staff management, data reporting, compliance, and the provision of support to community partners to deliver high-quality services.

**4. Focus on targeted improvements**

Avoid applying blanket changes across all CfC programs. Instead, identify specific areas where improvements are needed, preserving arrangements that work well and respecting the diversity of local contexts.


To strengthen delivery against the Working Together Agreement commitments, the CfC program must build on existing strengths while maintaining flexibility and respecting established partnerships. Universal mandates risk disrupting effective governance structures and undermining the program's ability to address local needs. Targeted improvements, informed by the practical realities of successful operations, will ensure CfC programs continue to deliver meaningful outcomes for children, families, and communities.

**Communities for Children Facilitating Partners (CfC FP)**

**Question 17. How should FPs actions and outcomes be measured? Would these best be done through the ideas proposed above or through another approach?**

**Question 18. Should the current Evidence Based Program requirements be changed? Would this be best done through the changes proposed above or through another approach?**

The CfC program plays a critical role in addressing diverse community needs, yet its effectiveness is often constrained by rigid measurement systems and strict evidence-based program requirements. FPs are tasked with managing program delivery, ensuring compliance,



and supporting community partners, all while demonstrating program impact. However, current frameworks rely heavily on standardised tools and fidelity requirements, which often fail to account for local contexts or enable cultural adaptation.

As previously mentioned, these challenges are particularly pronounced for First Nations and CALD communities, where cultural nuances and local priorities may not align with standardised program models. Strict 50/50 evidence-based program splits and uniform measurement approaches create barriers to innovation and exclude promising community-driven practises that could achieve meaningful outcomes.

To maximise the program's impact, a shift towards flexible, locally relevant, and culturally responsive approaches to both measurement and program requirements is essential.

## **Recommendations**

### **1. Adopt evidence-informed approaches**

Transition from rigid evidence-based requirements to evidence-informed programs that maintains quality while enabling cultural and local adaptations. This flexibility ensures programs can meet diverse community needs without compromising outcomes.

### **2. Develop locally relevant measurement frameworks**

Create measurement frameworks that reflect local contexts and community-specific outcomes. Combining quantitative metrics with qualitative insights will better capture the program's genuine impact.

### **3. Validate promising practices**

Establish mechanisms to identify and validate innovative or community-driven practises that demonstrate effectiveness through alternative evidence forms. These practises should be recognised as legitimate components of program delivery.

### **4. Build capacity for local evaluation**

Invest in resources and training for local program evaluation, empowering communities to design and implement tailored evaluation approaches. This ensures culturally appropriate and locally aligned measures of success.

### **5. Streamline compliance and reporting requirements**

Simplify fidelity and reporting requirements to reduce administrative burdens on FPs and community partners. Streamlined processes will allow providers to focus on meaningful service delivery rather than rigid adherence to standardised models.

### **6. Support comprehensive outcome evaluation**

Implement flexible outcome frameworks that assess short-, medium-, and long-term goals across different population groups. This allows for robust evaluation while maintaining adaptability to diverse contexts.

To enhance the CfC program's effectiveness, it is critical to balance rigorous evaluation with flexibility and cultural responsiveness. By shifting to evidence-informed approaches, recognising promising practises, and creating locally relevant measurement frameworks, the program can better demonstrate its impact while fostering innovation and inclusivity. These changes will empower FPs and community partners to deliver high-quality services that are both adaptable and responsive to the unique needs of the communities they serve.



## Family Mental Health Support Services (FMHSS)

**Question 19. Should changes be made to FMHSS, so services are able to focus solely on early intervention? (If yes, please specify.)**

*MFC is not involved in FMHSS service provision and therefore declines to provide input on this question.*

## Children and Parenting Support (CaPS)

**Question 20. Should changes be made to the CaPS program so services are better placed to focus on prevention, early intervention, and providing children with the best possible start to life? (If yes, please specify.)**

MFC strongly supports changes to the Children and Parenting Support (CaPS) program to better focus on prevention, early intervention, and providing children with the best possible start to life. Strengthening these outcomes aligns with existing recommendations made in this submission, with specific emphasis on addressing access barriers, enhancing workforce capabilities, and fostering community partnerships.

### Recommendations

- 1. Fund transport to ensure service accessibility**

Limited transport options remain a significant barrier for families, particularly in regional and remote areas. Dedicated transport funding would enable families to access services consistently, ensuring greater reach and equity.
- 2. Provide place-based venue support**

Flexible funding for local venue access would enable service delivery in community-based locations, fostering trust and increasing participation. Supporting compliance costs for venues would further reduce operational barriers.
- 3. Increase salary funding to attract qualified staff**

Competitive salaries are essential to attract and retain skilled staff, particularly in rural and remote areas where recruitment challenges are acute. Investing in workforce capacity ensures high-quality service delivery.
- 4. Allocate resources for community engagement and partnerships**

Funding for community engagement activities and partnerships would strengthen local relationships, improve service uptake, and enable co-designed approaches tailored to specific community needs.
- 5. Support integrated responses through broader policy changes**

Additional funding should be directed towards building integrated community responses, including meaningful partnerships, data sharing, and collaborative initiatives. These measures ensure a holistic approach to prevention and early intervention.

Implementing these changes would enhance the CaPS program's ability to focus on prevention and early intervention while reaching harder-to-serve families. And by addressing practical barriers, strengthening workforce capabilities, and fostering integrated community partnerships, the program can provide children with a stronger foundation for lifelong success.



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