



**2022/23
Victorian State
Budget Submission**

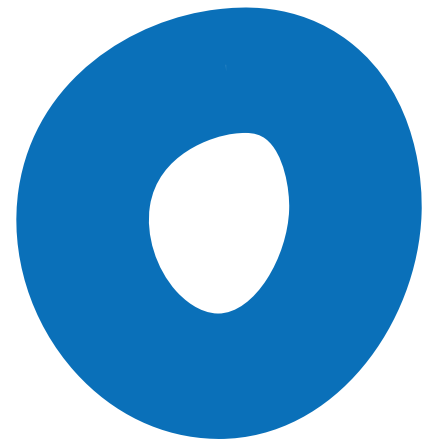
November 2021

About the Centre for Excellence in Child and Family Welfare

The Centre for Excellence in Child and Family Welfare (the Centre) is the peak body for child and family services in Victoria, representing more than 150 community service organisations, students and individuals. The Centre advocates for the rights of children and young people to be heard, to be safe, to access education and to remain connected to family, community and culture. Our vision is to see a community that is fair, equitable and creates opportunities for children and their families to live happy and healthy lives.

Acknowledgement of Country

The Centre acknowledges and pays respect to past and present traditional custodians and Elders of this country on which we work. The Centre also acknowledges the injustices and trauma suffered as a result of European settlement, the Stolen Generations, and other policies such as the forced removal of children from their families, communities, culture and land. We respect the resilience of the Aboriginal and Torres Strait Islander community in the face of this trauma and respect their right to, and aspiration for, self-determination and empowerment.



Victorian Budget Submission

The COVID-19 pandemic caused disruption for all of us, but for some, the impacts were far greater. Children, young people and families who were already living with adversity have been disproportionately affected by the social isolation, educational disruption and financial hardship arising from the pandemic. Insights from direct practice and research are now emerging and show that the negative consequences of the pandemic will extend far into the future without targeted action.¹

This submission is being prepared at a time when children and young people in particular are being profoundly affected by COVID-19 and the impact of government strategies to control the spread and severity of the pandemic. The Victorian Commission for Children and Young People (CCYP) recently released its latest snapshot report showing a growing and cumulative impact on children's mental health, wellbeing, education, safety and security.²

It is crucial that we keep children and young people in clear focus. Government investments must recognise and respond to the ongoing and significant impact of the pandemic on children now and in the future. Further, investing in the resilience of families disproportionately affected by COVID-19 must be a priority for government so that we recover from the pandemic as a community, with no one left behind.

The child and family services system is the cornerstone of our response to children in Victoria. Service providers work directly with families and see firsthand the co-existing challenges being experienced, including child abuse and neglect, poverty, family violence, mental health, AOD, and disability. This highly qualified and skilled workforce provides a broad range of services from early help through to statutory care and youth justice. We welcomed investment in the 2021-22 budget of a record \$1.2 billion over four years in the child protection and family services system. The budget included a range of measures to better support children and their families experiencing adversity, including:

- A trial to embed family services in universal settings such as schools, early years services and community health hubs
- Funding to give 400 Aboriginal families each year access to Koorie Supported Playgroups and In-Home Parent Coaching to support the home learning environments of young Aboriginal children
- Family Group Conferencing to divert vulnerable children and families from statutory services
- Trials in Brimbank-Melton and Goulburn of a new whole-of-family support model
- Establishment of 13 reformed infant and child area mental health and wellbeing services to provide a dedicated service stream for infants, children and families (aged 0-11).

1 The Smith Family 2021, *Emerging from COVID-19: insights snapshot*, The Smith Family, Sydney.

2 Commission for Children and Young People (CCYP) 2021, 'Growing pandemic impacts revealed in new survey of Victoria's children and young people released today', 23 July, viewed 26 July 2021, <<https://ccyp.vic.gov.au/news/growing-pandemic-impacts-revealed-in-new-survey-of-victorias-children-and-young-people-released-today/>>.

Our budget submission will make the case for investments to strengthen and extend our support system and fill evident gaps across seven key areas:

- Children front and centre
- Investing early to improve long-term outcomes
- Addressing the ongoing impacts of the COVID-19 pandemic
- Providing evidence-driven support to children and families across the continuum
- Responding to unmet needs
- Improving our care system
- Support for the child and family services workforce.

The following asks have been identified as the most critical for our sector and for improving child and family wellbeing in the 2022-23 budget. We call on the Victorian Government to:

- Increase funding to family services by 25 per cent to prevent families from missing out on crucial support and ensure any remaining lapsing funding in family services is continued (see page 25)
- Urgently invest in a workforce strategy to increase the supply and diversity of qualified professionals in the child and family services sector (see pages 25-26)
- Support a sustainable sector by funding services in a way that enables them to keep pace with demand and allows space for innovation and flexibility to respond to unmet need (see page 25)
- Fund the state-wide expansion of Pathway to Good Health multi-disciplinary clinics to enable the sustainable delivery of health and mental health assessments and reviews for all children and young people in alternative care and all children known to child protection (see pages 11-12)
- Invest in an extension of the scope, potential and activities of OPEN to continue to deliver and build strong outcomes for the sector (see page 17).

We extend our heartfelt thanks to our member organisations for their crucial assistance in preparing this submission and ensuring the most pressing needs of our sector and the children and families we support are put forward for investment and action from government.

The Appendix on page 28 includes a summary of all the recommendations in our budget submission for quick reference.

Children front and centre

The Centre envisions a Victoria in which children's rights to grow up healthy and connected to family, community and culture are fully realised, and their parents are adequately supported in their primary responsibility of raising children. Too often, children are invisible and do not receive the attention and targeted responses that they need to thrive. Below are key investments needed to make sure children are brought front and centre.

Victoria needs a Minister for Children

Greater effort is required to place children, their rights and their best interests at the centre of decision-making. This can be supported through a dedicated leadership role within Parliament that would coordinate efforts across government to improve child wellbeing. The Centre recommends that the Premier appoint a Minister for Children and Families with responsibility for improving outcomes for children and young people.

The Centre also calls on the Victorian Government to establish a whole-of-government taskforce to make sure that no child is left behind in responses to and recovery from emergencies. As Victoria continues to respond to the challenges of bushfire recovery, the growing threat of future natural disasters, climate change and the continuing COVID-19 pandemic it is all too easy for children to be forgotten. We do not know what the future needs of children will be in a rapidly changing environment, so a dedicated mechanism within government for responding to needs as they arise is required. This would provide a clear avenue for children and the sector to communicate what they are experiencing and seeing, and to provide advice directly to the people in government with the power to deliver a response.

The right to recovery for children who have experienced family violence

Children who have experienced violence have a right to treatment.³ Yet in Victoria, members report a lack of specialist responses and therapeutic support options for children who have experienced family violence and long waitlists for the few services that do exist.

It has been a challenge to have children recognised as victim survivors of family violence in their own right with specific risks and needs, despite a growing body of evidence showing that family violence can affect children's subsequent behaviour, their engagement with and performance at school, their cognitive development and their physical and mental health. The Centre is seeking to change this through a project, funded by Family Safety Victoria, to make sure that practitioners across the broader service sector are well equipped to use a child rights lens and identify and prioritise what is in the child's best interests.

Despite significant family violence reform investment in Victoria, there is still much to be done if children are to be adequately supported in their recovery, given agency in the decisions that affect them, and provided with early access to specialist support services. The Centre is calling on the Victorian Government to invest in a dedicated family violence recovery service stream for children that provides an entitlement to support for all children who have experienced family violence.

Parents can also be supported to help their children recover through programs like Parenting after Violence, a group-based program for mothers that assists them to understand the impacts of family violence on children, rebuild parenting confidence and learn ways to support their children's development and healing. The Parenting after Violence program delivered by cohealthis

3 Article 19, [Convention on the Rights of the Child](#).

experiencing very high demand and many women and children are missing out.⁴ Our members have noted that programs like these are effective because professionals can only spend limited time with children, whereas building the capacity of caregivers provides far greater opportunity to facilitate change through these relationships. We call on the Victorian Government to invest in the expansion of locally based services that support recovery from violence for children.

The Caring Dads program helps fathers improve their relationships with their children and end controlling, abusive and neglectful behaviour. Caring Dads recently won the Minister's Award for Innovation in Protecting Children at the 2021 Victorian Protecting Children Awards and was described as 'a major advance in addressing family violence'. The program is focused on reducing violence and enhancing the safety and wellbeing of children but currently has limited reach. The Centre recommends that the Victorian Government invest in a significant expansion of the successful Caring Dads program.

Children who have experienced abuse or neglect

The Centre is concerned that children experiencing abuse and neglect have been invisible during the COVID-19 pandemic as opportunities to identify and report abuse were reduced. We welcome acknowledgement in the *Roadmap for Reform: pathways to support for children and families* (the Roadmap) that children have 'the right ... to heal from adverse experiences'.⁵ Access to therapeutic support and specialist counselling for children who have experienced adverse life circumstances, including those known to child protection and with an experience of alternative care, is crucial, yet too many children miss out.⁶ Not only do these children need support to heal from the abuse, neglect and trauma they have experienced, many also need support to process the grief and loss experienced through removal from family. When supports are unavailable there can be flow-on effects for mental and physical wellbeing and other life outcomes that affect social and economic participation.⁷

Therapeutic models of care are underpinned by a guiding framework that incorporates theories of attachment, trauma and neurological development, provide specialised and ongoing assessment and develop an individualised therapeutic treatment plan.⁸ Despite the existence of some excellent therapeutic models, such as Take Two, insufficient investment means these have limited reach.

The Centre is calling on the Victorian Government to urgently expand the reach of specialist counselling and therapeutic, evidence-informed programs for children across the state.

Closing the Gap for Aboriginal children and young people

Change requires formal mechanisms for transferring funding and responsibilities to Aboriginal organisations to keep Aboriginal children safe and supported. While there is good progress within the Victorian child and family services system, this work must be replicated across all service systems to achieve the outcomes committed to under the National Agreement on Closing the Gap. It is important that governments provide proportionate investment so that funding and the responsibility that goes with this can be placed in Aboriginal hands to better enable

4 Choahan, N 2021, 'Mum fleeing family violence says cohealth parenting course gave insight into children's trauma', *ABC News*, 12 August.

5 Department of Families, Fairness and Housing 2021, *Roadmap for Reform: pathways to support for children and families*, Victorian Government, Melbourne, p. 1.

6 Alternative care, previously referred to as out-of-home care, means care of a child by a person other than a parent of the child. It can refer to foster, kinship, residential care and permanent care. This change has been made based on advice from young people with care experience and is consistent with upcoming changes to legislation.

7 Sentencing Advisory Council 2016, *Reoffending by children and young people in Victoria*, Sentencing Advisory Council, Melbourne.

8 Department of Health and Human Services 2016, *Program requirements for the delivery of therapeutic residential care in Victoria*, Victorian Government, Melbourne.

self-determination. The Centre supports the establishment of a compact that would formalise a proportionate investment process across multiple service systems.

Raise the age of criminal responsibility

In Victoria, children as young as 10 years old can be charged with a crime and sent to prison, yet data clearly shows that the younger a child is when they enter the youth justice system, the higher the likelihood that they will reoffend.⁹ Young children are being criminalised and imprisoned for actions they are not developmentally able to comprehend and for adverse experiences and cumulative harm outside their control.

State Attorneys-General recently supported development of a proposal to increase the minimum age of criminal responsibility from 10 to 12. The Centre continues to call on the Victorian Government to raise the age of criminal responsibility to at least 14 years of age in line with the medical evidence and international standards. The \$1748 per day that Victoria spends for each child and young person in prison would be better spent on expanding interventions that effectively support children to reduce harmful behaviour and contact with the justice system such as Functional Family Therapy – Youth Justice (FFT-YJ) and Multisystemic Therapy (MST).

While we recognise significant efforts by the Victorian Government to reduce the number of children and young people in contact with the justice system,¹⁰ further steps must be taken. The evidence is clear that criminalising young children is harmful, and this necessitates immediate action.

The health of children and young people in regional areas

Access to specialists such as paediatricians and psychologists becomes increasingly difficult the more remote the area. Recruitment and retention of specialists in such areas is notoriously challenging, and our members report that wait lists for a paediatrician in regional areas of Victoria can be over six months.

Recent Victorian research shows that foster and kinship carers find mental health and paediatrics to be among the most difficult of all health services to access for the children in their care.¹¹ According to 2016 Department of Health data, the number of paediatricians in Victoria falls below that of several other states when compared by ratio to population.¹² Active internship programs and training institutions located in regional towns could help to address this issue. We recommend that the Victorian Government increases the number of publicly funded paediatricians and child psychologists in Victoria and locates the new positions in community health services, with priority given to regional and rural areas.

Access to the benefits of early childhood education and care

The Centre is currently engaged in a program of work funded by the Department of Education and Training that seeks to address barriers to early years services for families experiencing vulnerability. A literature review conducted to support this work found that transport and cost remain key barriers to attendance that limit children's access to the benefits of early childhood education and care.

9 Sentencing Advisory Council 2016.

10 See, for example, [Framework to reduce criminalisation of young people in residential care](#).

11 McLean, K, Hiscock, H, Scott, D & Goldfeld, S 2019a, 'Foster and kinship carers' experiences of accessing health services for children and young people in out-of-home care', *Journal of Paediatrics and Child Health*, vol. 55, no. S2, pp. 15-24.

12 Department of Health 2017, *Paediatrics and child health: 2016 factsheet*, Australian Government, Canberra.

Improving equitable access to the benefits of early childhood education and care for children experiencing vulnerability during this critical developmental stage can be facilitated through the extension of a payment such as the Conveyance Allowance Program for school age children to kindergarten children so that their families and carers receive the financial support needed to overcome this barrier. This will build on previous investment for the progressive roll-out of kinder for every 3-year-old.

Complex enrolment processes are another common barrier to access, and different processes are currently operating in local government areas across Victoria.¹³ The Centre supports recommendation 47 of the Inquiry into early childhood engagement of culturally and linguistically diverse communities and calls on the Victorian Government to adopt a state-wide approach to kindergarten enrolment, with a single, easily accessible and central enrolment process across Victoria.

Children who are victims of crime

Many Victorian children have been or are currently victims of crime. While supports are offered to children through the Victims of Crime Assistance Tribunal and the Victims Support Agency, there are only limited targeted or specialist services for children who are victims of crime. Families currently need to access mainstream counselling services for their children to receive treatment. Dedicated programs to support children who are victims of violent crime in Victoria should be developed and expanded.

The Centre would like to draw on its expertise in helping government to identify service gaps, articulate the needs of children who are victims of crime, including child sexual abuse, and work with our members to design appropriate and targeted service responses.

Preventing child sexual abuse and providing treatment for victim survivors

The Royal Commission into Institutional Responses to Child Sexual Abuse, Victoria's Child Safe Standards, and the Reportable Conduct Scheme have improved organisational prevention of and responses to child sexual abuse. However, we know that most child sexual abuse occurs within a family setting. Victoria is currently lacking in specialist evidence-informed programs to target the prevention of child sexual abuse in the home.

There is also a lack of specialist treatment programs for children who are victim survivors of sexual abuse and no clear pathways for children to receive local community-based treatment for the abuse. The Centre is calling on the government to fund research on child sexual abuse prevention and the best treatment options for children in community settings.

We also call on the government to fund evidence-based interventions like the Power to Kids program to prevent sexual harm to children and young people in care. The Power to Kids program was developed by MacKillop Family Services and the University of Melbourne to respond to the high risk of child exploitation, harmful sexual behaviour and dating violence for young people in care and was highly commended at the 2021 Victorian Protecting Children Awards. The program has been evaluated and is now being implemented across all MacKillop residential care houses.

13 Legislative Assembly Legal and Social Issues Committee 2020, [Inquiry into early childhood engagement of culturally and linguistically diverse communities](#), Parliament of Victoria, Melbourne.

Investing early to improve long-term outcomes

The Centre has long recognised that early intervention is paramount in a child protection service system that is overwhelmed by acute demand. We also know that a commitment to the most disadvantaged will see the biggest returns from early intervention. The Centre strongly welcomes the priority focus of the Roadmap over the period 2021 to 2024 to ‘shift the children and family system to intervene earlier to improve family functioning, keep children with their families today and safely reunify children, with a priority focus on Aboriginal families’.¹⁴

Early intervention is about providing the earliest possible help, when challenges first emerge, to prevent escalation that may lead to statutory intervention or intractable problems. This means that Victorian Government investments must strengthen the capacity of parents to meet the needs of their children, reduce risk factors and increase protective factors to achieve better long-term outcomes.

In November 2019, the Centre and Berry Street commissioned Social Ventures Australia (SVA) to conduct financial modelling to examine the impact of greater investment in early intervention programs.¹⁵ This analysis was updated in August 2020 in response to COVID-19 and found that investing approximately \$193 million every year over ten years would deliver cumulative net savings of \$1.99 billion to the child protection and care system alone. Most importantly, SVA estimated that up to 1,460 children could be prevented from entering alternative care or progressing to residential care during this ten-year period.¹⁶

Further, without increased investment in early intervention, modelling shows that the number of children in care could potentially increase to around 27,500 over the next five years as a result of the pressures arising from COVID-19.¹⁷

We strongly welcomed investment by the Victorian Government in the development of an Early Intervention Investment Framework that will guide Treasury in the preparation of the state budget. Below we include key investments in the early intervention space within the child and family services sector.

Support before birth for families at risk of statutory intervention

Whenever a notification is made to child protection for an unborn child, the service system must have the capacity to provide the family with a service response to prevent future child removal. There are currently no guaranteed service options for families with unborn reports to child protection. Services such as the Family Preservation and Reunification Response and Family Foundations have some capacity to work with these families, however many continue to miss out. The Roadmap identifies children and families pre-birth experiencing vulnerability as a priority group.¹⁸ Dedicated teams could be established to engage with families through hospitals and other avenues and provide tailored early intervention supports to meet the needs of this priority cohort. The Centre recommends that the Victorian Government deliver a dedicated service response for all families that receive unborn reports to child protection.

14 Department of Families, Fairness and Housing 2021, p. 3.

15 Social Ventures Australia (SVA) Consulting 2019, [The economic case for early intervention in the child protection and out-of-home care system in Victoria](#), SVA Consulting, Melbourne.

16 Social Ventures Australia (SVA) Consulting 2020, [Keeping families together through COVID-19: the strengthened case for early intervention in Victoria's child protection and out-of-home care system](#), SVA Consulting, Melbourne.

17 SVA Consulting 2020.

18 Department of Families, Fairness and Housing 2021, p. 22.

Meeting the educational needs of children in care

Children in alternative care are more likely than their peers to experience educational challenges that impact their capacity to achieve their academic potential, participate in further education and secure employment.¹⁹

The Centre calls on the Victorian Government to provide ongoing funding for LOOKOUT Education Support Centres, LOOKOUT Career Education Advisors and LOOKOUT Early Childhood Learning Advisors (ECLAs), all of which have funding expiring within the next two years. The welcome expansion of LOOKOUT into the early education space is important to maintain to counter the educational disadvantage experienced by many children in alternative care and to intervene early to improve outcomes before children fall behind.

We also call on the Victorian Government to invest in the capacity of LOOKOUT Centres to deliver timely educational needs assessments for children upon entry into care, and for children currently in care who have not had access. The Centre is aware that there are a number of challenges contributing to workforce shortages in this space, and many children are waiting up to two years for an assessment, with significant consequences for their learning outcomes. We urge government to investigate ways to address these system blockages.

Children with disability

The child and family services sector in Victoria works with a high number of families with disability. A survey conducted by the Centre in June 2021 shows that a high proportion of practitioners' caseloads involve families with disability (whether a parent, child or both).

Article 23 of the Convention on the Rights of Persons with Disabilities states that 'In no case shall a child be separated from parents on the basis of a disability of either the child or one or both of the parents',²⁰ however research shows that too many families relinquish the care of their child with disability due to a lack of needed support.²¹ Children with disability continue to be overrepresented in alternative care in Australia, with the latest data showing that at least 15.3 per cent of children in alternative care have a disability (this figure is likely to be much higher as disability status remains unknown for 37.3 per cent of children in care).²²

The COVID-19 pandemic has been a particularly difficult time for many children and families with disability, with many experiencing increased expenses and financial stress, difficulty securing essential supplies, changes or limits to support and healthcare, lack of targeted information about COVID-19, a decline in mental health and experiences of isolation.²³ The Association for Children with Disability experienced a 40 per cent increase in demand for advocacy support over the past 12 months, indicating a pressing need to expand child-focused disability advocacy. Experiences during COVID-19 have highlighted the essential role of advocacy, and it is more important than ever for the NDIS and child and family services sectors to work together to

19 Department of Communities, Child Safety and Disability Services 2013, *Valuing and improving educational outcomes for children in out-of-home care*, Practice paper, Queensland Government, Brisbane.

20 United Nations 2006, Convention on the rights of persons with disabilities and optional protocol, viewed 29 April 2021, <<https://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>>.

21 Ellem, K, Wilson, J & Chenoweth, L 2016, 'When families relinquish care of a child with a disability: perceptions from birthmothers', *Australian Social Work*, vol. 69, no. 1, pp. 39-50; Nankervis, K, Rosewarne, A & Vassos, M 2011b, 'Why do families relinquish care? An investigation of the factors that lead to relinquishment into out-of-home respite care', *Journal of Intellectual Disability Research*, vol. 55, no. 4, pp. 422-433; Office of the Public Advocate (OPA) 2015, *Rebuilding the village: supporting families where a parent has a disability - report 2: child protection*, Office of the Public Advocate, Melbourne.

22 Australian Institute of Health and Welfare (AIHW) 2021, *Data tables: Child protection Australia 2019-20*, Child Welfare series no. 74, Cat no. CWS 78, AIHW, Canberra.

23 Dickinson, H & Yates, S 2020, *More than isolated: the experience of children and young people with disability and their families during the COVID-19 pandemic*, UNSW Canberra, Canberra; People with Disability Australia 2020, *People with disability and COVID-19*, People with Disability Australia, Sydney.

provide complementary disability and family strengthening supports to keep families safe, well and together.

The Victorian Government has recently invested in new roles to build the capacity of the child and family services system to support families with disability including the Children with complex disability support needs program and Family Services Specialist Disability Practitioners. Securing needed disability support is essential to strengthening family functioning and preventing family breakdown and early data shows these interventions are promising. These roles are only funded until June 2022, which does not provide enough time to evaluate their impact, however we expect that these positions will play a crucial role in preventing children with disability from entering care. The Centre calls on the Victorian Government to extend and expand these critically important roles.

Expand Raising Expectations

An inquiry by the Commission for Children and Young People (CCYP) found that most Victorian care leavers do not have supports in place to help them engage in further education, training or employment after they leave care.²⁴ Even with recent policy changes to benefit current care leavers, there remain significant challenges for young people in care, leaving care and who have left care when it comes to engagement in tertiary education; an issue with implications for their future life outcomes. Barriers that lead to people with care experience missing out on going to TAFE or university excludes them from opportunities to improve their employment prospects and earning potential.

Raising Expectations is a unique evidence-informed model that provides a platform for government, universities, TAFEs and the community sector to work together to improve access, provide dedicated support and enable successful completion of vocational and/or higher education study for people with care experience. The model has contributed to tangible improvements in the education and life opportunities for individuals who have been in care, seeing the number of care experienced people enrolled in TAFE and university rise to around 700 students.

A Social Return on Investment analysis conducted by Deloitte found that for every dollar invested, Raising Expectations generates an estimated minimum of \$1.80 in economic and social benefits, and the social benefits of Raising Expectations substantially outweigh the costs.

Raising Expectations is currently funded by the Department of Education and Training until December 2022. There is much work still to be done to embed systems change and foster a culture of high expectations and support for young people and adults with care experience. We are seeking a further four years of funding to continue expansion of the Raising Expectations program to support educational access and success for people with a care experience.

Priority implementation of child-focused mental health reforms

The impact the COVID-19 pandemic has had on children's mental health cannot be overstated, with some members reporting a twenty-fold increase in children experiencing mental health challenges. The Centre welcomed the \$842 million investment over four years in mental health recommendations for the 0-25 age group in the 2021-22 budget. This early commitment to meeting the needs of children is encouraging. Following the family violence reforms in which recommendations for children were slow to be implemented, there are concerns that mental health recommendations that will enable early intervention for children may also be pushed

24 Commission for Children and Young People (CCYP) 2020, [Keep caring: systemic inquiry into services for young people transitioning from out-of-home care](#), CCYP, Melbourne.

to the back of the queue. We are therefore calling for infant and child-focused mental health recommendations to continue to be prioritised and funded in the 2022-23 budget. In particular, we are calling for the Victorian Government to fund recommendation 24 so that each of the 13 Infant, Child and Youth Area Mental Health and Wellbeing Services can employ up to three specialist trauma practitioners.

The Centre is also concerned about the potential impacts of the separation of health and human services into two departments. Our sector is well-placed, ready and willing to deliver mental health reforms alongside our health colleagues to bridge this gap. We urge the Department of Health and those leading the mental health reforms to continue working with the Centre and our sector to integrate supports and build strong connections between child and family services and the mental health system to ensure that children and families experiencing vulnerability and disadvantage do not miss out and do receive full access to the benefits of a reformed mental health system.

Improving the health of children and young people in contact with child protection

Children living in the care system are known to have higher rates of physical, mental and developmental health needs than the general population.²⁵ It is critically important that all children in alternative care have opportunities for early identification of health needs for their wellbeing, future outcomes, to prevent disengagement from school, and to disrupt a potential trajectory into the justice system.

The *National Standards for out of home care* require that ‘children and young people have their physical, developmental, psychosocial and mental health needs assessed and attended to in a timely way’, while the *National Clinical Assessment Framework* recommends an initial health check within 30 days of the child entering care and a comprehensive assessment within three months.²⁶ Data shows that these standards are not being achieved for Victorian children in alternative care.²⁷

In Victoria, around 250 children have access to comprehensive health assessments through Pathway to Good Health (PTGH) multi-disciplinary clinics across North and West metropolitan Melbourne and Gippsland. Research has shown that rates of attendance at paediatricians and mental health clinicians increased after the introduction of PTGH compared to areas without. It was intended that all children entering alternative care and all those living in residential care across the two regions would have access to these assessments, however this has not eventuated.²⁸ Our members describe positive outcomes from this promising program, which has unfortunately experienced long-term funding uncertainty.

Co-located health clinicians within child protection and child, youth and family service teams have been shown to facilitate more timely healthcare for highly vulnerable children and young people. This is evident in the Royal Children’s Hospital Vulnerable Child Health Coordinator role (outposted to the Brimbank-Melton and West Melbourne child protection teams) and in the Principal Practitioner role within the Hume-Moreland and NEMA teams. Such roles need to be rolled out state-wide, in partnership with the relevant local health services, so that it is no longer

25 McLean, K, Little, K Hiscock, H, Scott, D & Goldfeld, S 2019b, ‘Health needs and timeliness of assessment of Victorian children entering out-of-home care: an audit of a multidisciplinary assessment clinic’, *Journal of Paediatrics and Child Health*, vol. 55, no. 12, pp. 1470-1475.

26 Department of Families, Housing, Community Services and Indigenous Affairs & National Framework Implementation Working Group 2011, *An outline of National Standards for out-of-home care: a priority project under the National Framework for Protecting Australia’s Children 2009-2020*, Commonwealth of Australia, Canberra, p. 10.

27 McLean et al. 2019b.

28 Department of Health and Human Services 2018, Vulnerable children, viewed 28 March 2019, <<https://www2.health.vic.gov.au/about/populations/vulnerable-children>>; McLean et al. 2019b; Senate Community Affairs References Committee 2015, *Out of home care*, Commonwealth of Australia, Canberra.

the 'luck of the draw' for a child entering alternative care as to whether their health needs will be identified and addressed.

To act as a good parent would and act early to ensure the health of children and young people in the care of the state, the Centre recommends that the Victorian Government:

- Amend legislation to include a requirement for health assessments and follow up services for children entering care within a set time frame and implement a process to monitor compliance;
- Fund the state-wide expansion of the successful Pathway to Good Health multi-disciplinary clinics with recurrent funding for existing and new clinics to enable the sustainable delivery of health and mental health assessments and reviews for all children and young people in alternative care and all children known to child protection within the timelines agreed to in the *National Standards for out of home care*; and
- Expand the co-location of health clinicians within child protection and child, youth and family service teams state-wide.

These investments are crucial to realising the three-year impact envisioned in the Roadmap that 'children and young people in care are supported to achieve positive health ... outcomes'.²⁹

Addressing youth homelessness

Youth Foyers provide a proven solution to improving educational and employment outcomes for young people aged 16 to 24 years who are at risk of or experiencing homelessness, while concurrently providing affordable and secure accommodation that builds the foundations for preventing long-term homelessness.

The model has proven to be effective with a five-year, longitudinal study of the three Education First Youth Foyers in Victoria conducted from 2013 to 2018 finding that the model is successful in improving education, employment, housing, and health and wellbeing outcomes, which were sustained in the year after leaving the Foyer.³⁰

The expansion of Education First Youth Foyers has been recommended in a number of recent reports including the Victorian Parliament's Legal and Social Issues Committee's final report for the Inquiry into Homelessness in Victoria, the Victorian Aboriginal Housing and Homelessness Framework (Mana-na woorn-tyeen maar-takoort), and Victoria's Infrastructure Strategy 2021-2051.

Youth Foyers foster greater engagement and retention in education and training and harness the ability of young people to be economically productive citizens. They provide an effective and scalable solution that addresses housing, health, employment and education needs of young people experiencing disadvantage. This is even more important in the context of the economic impacts of COVID-19 on young people. The Centre and the Brotherhood of St Laurence recommend that the Victorian Government fund new Education First Youth Foyers, with a particular focus on regional Victoria. Infrastructure Victoria identified Bendigo, Geelong, Mildura, Morwell, Wangaratta and Wodonga as possible locations for new foyers.

29 Department of Families, Fairness and Housing 2021, p. 29.

30 Coddou, M, Borlagdan, J & Mallett, S 2019, [Starting a future that means something to you: outcomes from a longitudinal study of Education First Youth Foyers](#), Brotherhood of St Laurence and Launch Housing, Melbourne.

Addressing the ongoing impacts of the COVID-19 pandemic

The COVID-19 pandemic has affected every area of our lives and will continue to do so for some time. While measures to respond to the impacts of the pandemic can be found throughout our submission, here we focus on needed responses in two areas in which children have experienced disruption that will have long-term consequences without intervention: education and social connection.

Improving educational outcomes for children and young people

Expanding access to tutoring programs is important to counter the impacts of COVID-19 on educational outcomes, and we strongly welcome the announcement that the Tutor Learning Initiative will continue in Victorian schools. To complement this support, we recommend an expansion of targeted tutoring programs for children experiencing disadvantage and in alternative care who are likely to be experiencing educational challenges that pre-date the pandemic. A key example of such programs is the Catch-Up Learning pilot program delivered by The Smith Family, a 20-week online tutoring program delivered one-on-one by qualified teachers for financially disadvantaged students struggling with literacy and numeracy. An evaluation of the program assessed the program's impact on student engagement and the extent to which literacy and numeracy improved. It found that 86 per cent of students showed above expected progress in either literacy or numeracy, and the program strengthened students' love of learning.³¹

Another example is TEACHaR, a well-established specialised tutoring program delivered by Anglicare Victoria for children and young people experiencing vulnerability including those in alternative care. The program currently employs 27 teachers in regions serviced by Anglicare, however more children could benefit through the expansion of TEACHaR. The Centre recommends that the Victorian Government invest in the expansion of tutoring programs to ensure, at minimum, that all children and young people in alternative care have access to one-on-one assistance from a qualified teacher, to support their learning and engagement in school.

The Navigator program is funded until June 2022 and supports young people to address and overcome barriers to school engagement and learning through the provision of intensive, trauma-informed case management, including assertive outreach. Navigator has achieved school re-engagement with 70 per cent of young people in the program.³² The program currently provides support to high school age students however school engagement issues often begin much earlier, and online learning has caused significant disruption for many children who will likely need support to reengage in face-to-face learning. The Centre recommends that ongoing funding be provided for this successful program, and that it be expanded to primary school children showing early signs of disengagement from school.

Building and strengthening social and community cohesion and connection for children and their families through playgroup

COVID-19 has had a huge impact on social cohesion as physical distancing and limited social engagement opportunities have created distance within communities. Strong social support is a protective factor and pivotal to dealing with stress, anxiety and loneliness. As we begin to emerge from lockdown, it is important that we rebuild and strengthen connection to community, and playgroup is the logical avenue for this to occur for children and their families.

Lockdowns and restrictions have significantly hindered playgroup operations and capacity in

31 The Smith Family 2021, *Improving young Australians' literacy and numeracy: the Catch-Up Learning program*, The Smith Family, Sydney.

32 Department of Education and Training n. d., *Navigator pilot – evaluation snapshot*, Victorian Government, Melbourne.

Victoria, reducing the number of sessions during 2020 and 2021 by approximately 80 per cent.³³ Reduced social interaction is likely to have resulted in social skills development setbacks for many children during the pandemic. It is therefore necessary to have a targeted plan to bounce back.

The body of evidence in support of playgroups continues to grow and playgroup attendance has been associated with children starting school with higher levels of social competence and emotional maturity.³⁴ A cost-benefit analysis found a \$3.60 return per \$1 invested in Australian community playgroups, suggesting a \$584 million net benefit over 10 years.³⁵ We now face an urgent need to ensure that playgroups and their significant benefits are not wiped out as a result of the pandemic. Targeted investment and action are required to ensure this does not occur.

To support playgroups to recover and families to reengage in their communities, the Centre and Playgroups Victoria are calling on the Victorian Government to invest in the following measures:

- Invest in dedicated roles to support the development of baby playgroups to ensure that new parents who have experienced isolation and missed out on usual opportunity to connect with other new parents during the pandemic can be supported to engage
- Fund Playgroup Victoria to continue and expand the Playgroup at Home LIVE program to engage families with diverse challenges and provide a platform to support soft re-entry to in-person engagement
- Fund coordinator roles within Playgroups Victoria to connect with local councils across the state to provide support to regenerate community playgroups. These roles would assess the playgroup landscape as we re-open, address the gaps caused by two years of lockdowns and engage in community development work to re-establish playgroups
- Invest in a coordinator role to establish playgroups co-located in schools to assist with rebuilding school communities and with young children's transition into school
- Support the development of intergenerational playgroups by funding a coordinator role to bring children into the aged care world to achieve better outcomes for both children and older citizens.

33 Data provided by Playgroup Victoria.

34 Sincovich, A, Gregory, T, Harman-Smith, Y & Brinkman, SA 2020, 'Exploring associations between playgroup attendance and early childhood development at school entry in Australia: a cross-sectional population-level study', *American Educational Research Journal*, vol. 57, no. 2, pp. 475-503.

35 Daly, A, Barrett, G & Williams, R 2019, *Cost benefit analysis of community playgroup*, Playgroup Australia, Canberra.

Providing evidence-driven support to children and families across the continuum

Through the advocacy of the sector and partnership with government, we have seen a significant cultural shift in Victoria, with child and family services having a stronger focus on effective implementation of evidence-based programs and evidence-informed practices. These programs support children and families experiencing vulnerability by intervening at key points across the system to prevent children entering or re-entering care.³⁶ They also serve to build connections across service systems, through joined-up initiatives between departments who then work together to deliver effective support to known children and families, particularly to ‘crossover kids’ involved in both child protection and youth justice.

Expanding the reach of proven evidence-based programs

In 2018 the Victorian Government funded a trial of seven evidence-based programs (EBPs) in Victorian child and family services, including:

- SafeCare[®]
- Functional Family Therapy - Child Welfare[®] (FFT-CW)
- Family Foundations[®]
- Multisystemic Therapy – Psychiatric[®] (MST-Psych)
- Tuning Into Kids[™] and Tuning Into Teens[™]
- Triple P[®]
- Parents Under Pressure[™]

Evidence from service delivery in the Australian context is strong and growing. Outcomes from Functional Family Therapy – Child Welfare (FFT-CW) show that among Victorian families engaged in the program, 86 per cent of these families successfully remained together.³⁷ SafeCare has resulted in 87 per cent of families (33 families) reducing hazards in their home by 60 per cent or more by post treatment.³⁸ Multisystemic Therapy has achieved improvements to family functioning by a moderate or great extent by program closure for all families engaged with the program.³⁹ We welcome recent announcements of additional investment in the proven FFT-CW and Triple P programs and call for further funding for all EBPs to enable expansion to more families.

Our sector is also continuing to seek opportunities to deliver other evidence-based programs in the Victorian context, such as Keeping Foster and Kinship Parents Trained and Supported (KEEP).

The Centre is calling on the Victorian Government to significantly expand the reach of established EBPs, support the sector to commence delivery of other EBPs, and ensure their longevity by providing them with ongoing, recurrent funding.

36 Social Ventures Australia (SVA) Consulting 2019, [The economic case for early intervention in the child protection and out-of-home care system in Victoria](#), SVA Consulting, Melbourne.

37 OzChild 2020, [OzChild annual report 2019-20](#), OzChild, Melbourne.

38 OzChild 2020.

39 OzChild 2020.

Continuing the journey to strengthen our sector's evidence base

Victoria has taken great strides to build an evidence-informed approach to service delivery which started with the Roadmap initiatives including the Common Elements Approach and trialing evidence-based programs and has now extended to the embedding of evidence-informed practice in the Family Preservation and Reunification Response. Acknowledging the significant focus on reforming practice for families with complex and entrenched issues and concerns through the Family Preservation and Reunification Response, consideration now needs to be given to achieving the same outcome for families with escalating issues within the family services space. We must explore how evidence-informed practices and a specific way of working can be applied and embedded in family services practice to achieve consistent and quality experiences of service delivery for families.

Family services work with children and families who present with multiple, complex and co-occurring needs with the aim of promoting children and young people's wellbeing. Services work with families in the home providing practical support to improve parenting outcomes and provide or source appropriate support to prevent further statutory response. Ambitions to transition from a traditional case-management to an evidence-informed approach are evident across the sector however are currently occurring without a collective vision, framework or measure of success.

Family services are prepared to embark on building a deep understanding about what is intended to be delivered, building towards and measuring fidelity, and measuring client outcomes. The Centre is calling on the Victorian Government to invest in and work alongside the sector to develop an outcomes-focused, evidenced-informed family capacity building framework for the delivery of family services that could be consistently applied across Victoria.

Victorian and Aboriginal Family Preservation and Reunification Response

The Centre welcomes the phase 2 expansion of the Victorian and Aboriginal Family Preservation and Reunification Response for high-risk and at-risk families, which aims to keep families together and reduce the number of children and young people entering and/or remaining in care through the provision of evidence-informed service models.

The rate of children in alternative care continues to rise each year.⁴⁰ In 2019-20, Aboriginal children were in alternative care at a rate of 99.9 per 1000 compared with 4.7 per 1000 for non-Aboriginal children, the worst rate nationally and one that continues to rise.⁴¹ To begin reversing these trends, the expansion of the response must be given the best chance of success.

Early data is showing that the model is making a promising difference to practitioner skills and family outcomes and the Victorian Government is now requiring organisations currently funded to deliver in scope programs and activities to join the response and engage in a new way of working.

To continue with the early success we are seeing, the Centre is calling on the Victorian Government to fund this initiative to the level needed to be able to deliver on its objectives and potential.

Strengthen Victoria's evidence-building infrastructure

The Outcomes, Practice, Evidence Network (OPEN) serves as a sector-led bridge between research and practice that has grown to become a crucial piece of infrastructure in the Victorian child and family service system. A recent evaluation found that OPEN has achieved great success

40 Australian Institute of Health and Welfare (AIHW) 2021, *Data tables: child protection Australia 2019-20*, Child Welfare series no. 74, Cat no. CWS 78, AIHW, Canberra.

41 *Ibid.*

in supporting the sector to create, share and use the best available evidence to improve outcomes for children and families.

Stakeholder feedback identified that OPEN has achieved unique impact by becoming the vehicle through which collaboration is cultivated and an evidence-informed sector is fostered. This has meant a cultural shift away from internally focused organisations towards a more unified sector that shares knowledge about what works in practice and how data can best be collected and used.

Centre members have consistently highlighted the critical role of Learning System Grants in supporting their organisations to build data and outcomes measurement capability to strengthen practice and demonstrate impact. It is important that OPEN has the capacity to support organisations to continue building on the foundational work enabled by these seed grants. The small OPEN team is experiencing high demand for its existing services and requires additional funds to meet the needs of the sector and continue building on the success OPEN has achieved.

The Centre is calling on the Victorian Government to invest in an extension of the scope, potential and activities of OPEN. A sustainable expansion of OPEN that would continue to deliver and build strong outcomes for the sector would require investment of \$5.3 million over three years.

Responding to unmet needs

Child and family services, and especially small, locally based organisations, are well-positioned to identify emerging and unmet needs in their communities. Our sector continues to innovate and seek creative ways of providing supports to those in need even when no funded services are available. It is crucial that the Victorian Government works with our sector to identify when funding is needed to support the capacity of organisations to respond to unmet needs.

Parents with intellectual disability

We know that removal of children from the care of their parents is disproportionate among parents with disability, in particular, parents with a cognitive disability.⁴²

Article 23 of the Convention on the Rights of Persons with Disabilities states that ‘States Parties shall render appropriate assistance to persons with disabilities in the performance of their child-rearing responsibilities’,⁴³ however families with disability frequently fall through the gaps in service systems and are not sufficiently supported in their parenting role.

Cohealth has received a small amount of funding to employ a specialist worker to support parents with intellectual disability in their family services program. Roles such as these are crucial to addressing the overrepresentation of parents with disability in the child protection system. The Centre is calling on the Victorian Government to fund these roles in each region of the state.

Parents with a mental illness

There are around 9,000 children and young people in Victoria who are carers,⁴⁴ and it is estimated that 25 per cent of children and young people worldwide live with a parent who has a mental illness.⁴⁵

Young carers of a parent with a mental illness face unique challenges because of their caring responsibilities, limitations to the care provided by a parent, and a lack of access to support services. The Royal Australian and New Zealand College of Psychiatrists has recognised that children with a parent with a mental illness have an increased risk of adverse developmental outcomes and of developing a mental illness themselves.⁴⁶

Unsupported parental mental health is a strong driver of children entering alternative care. Research demonstrates that family-focused early intervention improves outcomes and reduces the intergenerational transmission of mental illness by up to 40 per cent.⁴⁷ One of the strongest protective factors for children is good information about and a shared understanding about their parents’ mental illness.

The Centre welcomes the expansion of the Families Where a Parent has a Mental Illness (FaPMI) program to employ additional community support roles. To build on this investment and

42 Office of the Public Advocate (OPA) 2015, *Rebuilding the village: supporting families where a parent has a disability – report 2: child protection*, Office of the Public Advocate, Melbourne.

43 United Nations 2006, Convention on the rights of persons with disabilities and optional protocol, viewed 29 April 2021, <<https://www.un.org/disabilities/documents/convention/convoptprot-e.pdf>>.

44 Department of Health and Human Services 2020, *Victoria’s mental health services annual report 2019-20*, Victorian Government, Melbourne.

45 Zechmeister-Koss, I, Goodyear, M, Tuechler, H & Paul, JL 2020, ‘Supporting children who have a parent with a mental illness in Tyrol: a situational analysis for informing co-development and implementation of practice changes’, *BMC Health Services Research*, vol. 20, no. 326, pp. 1-15.

46 Royal Australian and New Zealand College of Psychiatrists (RANZCP) 2016, *Children of parents with mental illness – position statement* 56, RANZCP, Melbourne.

47 Siengenthaler, E, Munder, T & Egger, M 2012, ‘Effect of preventive interventions in mentally ill parents on the mental health of the offspring: systematic review and meta-analysis’, *Journal of the American Academy of Child and Adolescent Psychiatry*, vol. 51, no. 1, pp. 8-17.

strengthen responses for these children, the Centre recommends that the Victorian Government fund FaPMI to deliver peer support programs such as CHAMPS and Space4Us.

Targeted support for fathers in family services

Over the last 12 months, service organisations have seen a significant increase in the number of men seeking service support. For Family Life, men now represent 52 per cent of their client group. Our members tell us that workers tend to be less skilled working with fathers and services are often not targeted towards engaging men. This is despite the ability of fathers to make significant contributions to their children's safety, wellbeing and development, and evidence of improvements in outcomes for children through fathers' active involvement in parenting.⁴⁸ Providing accessible services to all parents necessitate changes to service delivery approaches and the provision of services outside of business hours. We must also ensure that work is able to take place with both parents and to support inter-parental relationships, even in cases of separation. In response to the growing needs of men in family services, Doncare created a father-focused position within family services which has been very well received and has led to increased willingness to engage in other services such as counselling. The Centre recommends that the Victorian Government fund father-focussed positions in family services teams across the state.

Culturally and linguistically diverse (CALD) families

People from culturally diverse, migrant and refugee backgrounds often experience significant barriers to the support and services they need, and their experiences and challenges remain largely invisible in mainstream discussions.⁴⁹ Existing service systems are not adequately tailored or nuanced to recognise or respond to the needs of these families, resulting in high levels of unmet need.

Our members tell us that many CALD families are experiencing high levels of stress due to separation from family during the COVID-19 pandemic, with some organisations seeing increased demand on already stretched services. Responses to culturally and linguistically diverse families can be strengthened by investing in the capacity of child and family services to provide culturally safe services through dedicated Practice Lead (CALD) positions within family services teams, and recruitment of a pool of bi-cultural and bilingual workers.

According to Deakin University, 'Bicultural workers and consultants have been increasingly identified as having a critical role in the effective provision of services to multicultural and multifamily communities'.⁵⁰ These culturally equipped workers are able to overcome many of the barriers that CALD families experience when in need of services and would assist with easing demand and providing quality support for these families.

A recent survey found that family violence services have seen an increase in CALD women seeking support for the first time during the COVID-19 pandemic.⁵¹ Given that take-up of family violence and other services may be relatively low because culturally diverse communities typically rely on intra-familial rather than external support,⁵² service providers must also be supported to respond appropriately and early to the needs of culturally and linguistically diverse families through outreach. There is also a need for culturally appropriate men's behaviour change programs.

48 Tehan, B & McDonald, M 2010, *Engaging fathers in child and family services*, CAFCA Practice Sheet, Australian Institute of Family Studies, Melbourne.

49 Ethnic Community Services Co-operative 2021, [Feedback on the new Early Childhood Approach](#), Ethnic Community

50 Weng, E, Mansouri, F & Vergani, M 2021, *The impact of the COVID-19 pandemic on delivery of services to CALD communities in Australia*, ADI Policy Briefing Series 2(2), Alfred Deakin Institute for Citizenship and Globalisation, Deakin University, Melbourne, p. 2.

51 Weng, Mansouri & Vergani 2021.

52 Sawrikar, P 2019, 'Child protection, domestic violence, and ethnic minorities: Narrative results from a mixed methods study in Australia', *PLoS ONE*, vol. 14, no. 12.

Supporting the LGBTIQ+ community

Our vision is for a society in which LGBTIQ+ Victorians and their families are safe, equal, and enjoy the benefits of full economic, educational and community participation.

LGBTIQ+ people frequently report delays seeking healthcare and experience stigma, discrimination, and perceived or actual threats to their safety when accessing mainstream health services, with many not being out to their doctors and many having to educate their doctors on LGBTIQ+ health needs. LGBTIQ+ specialised services, including sexual health clinics, often have long waiting lists and are primarily located in metropolitan areas. The Centre recommends that the Government commits \$20,000,000 per annum to a service delivery fund for LGBTIQ+ community-controlled health services, including the DocDir service, to enhance their capacity to provide services across Victoria, address barriers to LGBTIQ+ people accessing services, and reduce the health inequalities experienced by LGBTIQ+ people.

The Victorian Government can respond to the range of gaps in service delivery for the LGBTIQ+ community by:

- Funding the WithRespect LGBTIQ+ specialist service website to develop, publish and promote more resources for LGBTIQ+ people experiencing family violence, including resources on identifying, reporting and seeking support about family violence
- Expanding the LGBTIQ+ community education campaign launched during the 2020 Midsumma Festival across media and other outlets to raise awareness of family violence and available services and supports
- Funding the Rainbow Tick accreditation of mental health services
- Investing in training and upskilling of mental health workers to better equip frontline service providers to provide services for LGBTIQ+ people
- Providing ongoing funding of \$500,000 per year for a program of research into LGBTIQ+ health and wellbeing, including tri-annual Privates Lives and Writing Themselves In surveys.

Victorian children and families living in poverty

Recent research found that COVID-19 weakened the financial resilience of households with the lowest incomes, making them more vulnerable to financial shocks in the longer term.⁵³ This reduction in financial security will be a significant source of stress for many families.

The Preamble of the Convention on the Rights of the Child, notes that:

the family, as the fundamental group of society and the natural environment for the growth and well-being of all its members and particularly children, should be afforded the necessary protection and assistance so that it can fully assume its responsibilities within the community.⁵⁴

Yet prior to the pandemic, around 198,600 Victorian children were already living in poverty,⁵⁵ and many low-income parents with young children are subjected to harsh compliance measures such as payment suspensions that see families going without food.⁵⁶

53 Porter, E & Bowman, D 2021, *Shocks and safety nets: financial wellbeing during the COVID-19 crisis*, Brotherhood of St Laurence, Melbourne

54 See <https://www.ohchr.org/en/professionalinterest/pages/crc.aspx>

55 Tanton, R, Peel, D & Vidyattama, Y 2018, *Every suburb, every town: poverty in Victoria*, NATSEM, Canberra.

56 Tennant, D & Bowey, K 2019, *The impact of social security reforms on single mothers and their children*, Centre for Excellence in Child and Family Welfare, Melbourne.

Experiences of poverty in Australia are largely driven by the failure of the social security system to provide payments sufficient to lift incomes above the poverty line.⁵⁷ Unfortunately, the Australian Government persists with policies that trap families in poverty and compromise the wellbeing and development of children. The Centre continues to call on the Victorian Government to advocate through National Cabinet for a permanent and adequate increase to social security payments so that families can meet their basic living expenses.

In the context of a national government that refuses to take responsibility, it falls to local communities to respond to unmet need. For example, the Alannah & Madeleine Foundation provides backpacks full of essential items to children experiencing vulnerability. We thank the Victorian Government for efforts to mitigate the impacts of poverty on children and to support families in need, and we recognise the value of family services brokerage in alleviating some of the acute financial struggles experienced by families. We encourage government to support local responses to material hardship and continue to fund initiatives to combat poverty, including ensuring that family services have sufficient brokerage to be responsive to the evolving needs of families.

57 Davidson, P, Bradbury, B, Hill, T & Wong, M 2020, [Poverty in Australia 2020: part 1. overview](#), ACOSS/UNSW Poverty and Inequality Partnership Report No. 3, ACOSS, Sydney.

Improving our care system

The *Children, Youth and Families Amendment (Child Protection) Bill 2021* introduces significant amendments to improve outcomes for children and families in the child protection system. The extension of authorisation provisions to community service organisations is a progressive step towards implementing community-based solutions and interventions for families in crisis situations. The Centre calls for funding to enable a minimum of two community service organisations to pilot the steps towards authorisation.

The Bill also includes a greater emphasis on family group conferencing. The Centre views family group conferencing as an integral step towards earlier intervention to keep families together without the need for statutory orders. The Centre recommends that family group conferencing is funded so that every family that is at risk of entering, or who is involved in the court system is able to attend a conference.

Treatment Foster Care Oregon

The Centre believes it is time to rethink models of foster care including the adoption of professionalised foster care programs. Internationally, more than three decades of evidence show positive outcomes from specialised foster programs.

In Victoria, the evidence-based program Treatment Foster Care Oregon (TFCO), delivered by OzChild, provides intensive support to foster carers of children and young people with complex needs for a period of nine months.⁵⁸ Results from the program have seen children either returned to their families or moved to a long-term home-based care placement, and not enter residential care in the following two years after the program.⁵⁹ Among children and young people who graduated from TFCO, 80 per cent progressed to lower level care arrangements.⁶⁰ Unfortunately, despite a welcome continuation of funding in the 2021-22 budget, this program has very limited reach with only 10 children supported during 2019-20.⁶¹ The Centre is calling on the Victorian Government to expand the capacity of Treatment Foster Care Oregon.

Therapeutic support for all children in residential care

Children in residential care often present with histories of trauma, challenging behaviours, emotional and social difficulties and complex mental health needs. Traumatic experiences can have a profound impact on a child's psychosocial, cognitive and psychological development.

The majority of children in residential care are subject to long term care orders, meaning that the state is the legal guardian of these children. The state has a legal obligation to act as a good parent would in its care of these children.

Over recent years the Victorian Government has received a series of significant and concerning reports and inquiries into residential care. These reports tell us that the majority of children and young people in residential care are not receiving the care that they need and that our legislation requires.

At present, around 40 per cent of residential care placements are funded at the therapeutic level, which means they receive an additional \$400,000 in annual funding. While all children in residential care would benefit from access to therapeutic support, some are receiving this while the majority are not.

58 OzChild n.d., Treatment Foster Care Oregon (TFCO), viewed 24 September 2020, <<https://www.ozchild.org.au/service/treatment-foster-care-oregon-tfco/>>.

59 OzChild 2019, *Annual Report 2018/19*, OzChild, Melbourne.

60 OzChild 2020.

61 OzChild 2020.

At minimum, all residential care homes must be funded at the therapeutic unit price. We echo the Commission for Children and Young People's recommendation to address and heal trauma through a therapeutic model of residential care,⁶² and call on the Victorian Government to fully fund an effective and consistent therapeutic response for all children in residential care.

The significant and enduring operating deficit apparent across all alternative care programs in Victoria, the principal contributor of which is residential care, must be addressed. Chronic underfunding limits the capacity of providers to deliver an adequate residential care service.

The price review into residential care must recognise the actual operational costs of running residential care, including the financial impact of COVID and the shift towards more evidence-based models. Government should also continue to invest in the innovative and evidence-based models delivered by our sector to improve therapeutic responses for children in residential care such as Anglicare's Keep Embracing Your Success and Berry Street's Teaching Family Model. All children have the right to the best evidence-based therapeutic care we can provide.

Embedding the voices of children and families

In the social recovery period post-COVID, it is more important than ever that we create meaningful opportunities for the views of children and families to be heard and to act on their ideas and solutions. For this to be achieved, we must embed lived experience mechanisms within our service system. We welcome acknowledgement in the Roadmap that 'embedding lived experience of the child and family system into policy development and service delivery will lead to better outcomes for children and families'.⁶³

The Centre recommends that the Victorian Government fund youth advisory positions in peak bodies across the community services sector. These roles would employ young people full-time to embed their lived experience expertise in planning, projects, events, policy discussions, consultations and day-to-day work.

We also recommend investment in the establishment and evaluation of a youth-led pilot program for people with a lived experience of residential care to serve as mentors for young people aged 13-17 years who currently live in residential care. This recommendation comes directly from a group of young people, aged 18-25, who have lived experience of residential care and would take a leading role in the development, establishment and delivery of the program, supported by the Centre and CREATE Foundation.

The Voice of Parents project, led by the Centre, is developing an evidence and lived experience-informed systemic approach to parental participation, working directly with parent consultants who have had child protection contact. While the project has received funds to continue in 2021-22, a consistent, scalable, system-wide mechanism to embed parental participation in development, design and delivery of child and family services for those parents with child protection contact will require ongoing commitment and resources from government.

Valuing care

Our foster, kinship and permanent carers make a life-changing difference for children and young people when they cannot live safely with their birth family. These carers go above and beyond to provide safe, stable and loving homes when children need them most, and must be recognised and supported to maintain the crucial safety net that they provide.

A 2018 study found that the 270 foster carer households supported by their organisation

62 Commission for Children and Young People (CCYP) 2021, [Out of sight: Systemic inquiry into children and young people who are absent or missing from residential care](#), CCYP, Melbourne.

63 Department of Families, Fairness and Housing 2021, p. 4.

contributed over 1 million volunteer hours at a value of \$41,720,000.⁶⁴ This is an incredible contribution to our community that largely goes unrecognised by the public, and more must be done to profile the incredible work of our carers.

Our members tell us that many foster carers are needing to take a break from caring due to the strain of the pandemic, and there are not enough full-time carers to meet demand. Alongside measures to recruit more carers, and investment in other approaches such as TFCO, we must ensure that our existing carers receive the support they need to continue providing care. Care can be challenging and demanding, and carers deserve tailored therapeutic supports from services that understand their unique circumstances. The Centre recommends that the Victorian Government provide ongoing funding for the Carer Assistance Program delivered by the Foster Care Association of Victoria (FCAV), which is experiencing high demand, and invest in therapeutic support programs for kinship and permanent carers.

The evidence for the benefits of peer support in sectors such as mental health are widely recognised. Our sector can learn from this and support our foster, kinship and permanent carers in a strengths-based way by investing in a peer support program that would assist them to deal with challenges that arise in their life and caring role. The Centre recommends that the Victorian Government invest in the development and delivery of a peer support model for carers.

The recent carer census found that 40 per cent of kinship carers have a yearly household income below \$40,000,⁶⁵ and in 2017 the Victorian Ombudsman found that kinship carers are often not receiving adequate financial assistance.⁶⁶ It is no surprise that 26 per cent of kinship carers indicated that school supplies such as technology should be covered or subsidised.⁶⁷ It is crucial that kinship carers are provided with the financial assistance they need to provide quality care for children.

We welcome the Victorian Government's commitment to reviewing care allowances. Renumerating carers based on the needs of the child they care for regardless of the placement type is only fair and would ensure both children and carers are not unduly disadvantaged. However, in addition to allowance rates, significant issues exist in relation to needs assessments and client support funding that impact the financial wellbeing of carer households. Our members report that problems with the Special Needs Assessment process for children in kinship care can lead kinship carers to consider relinquishing to foster care so that the child's needs are better met. We are also told that the Client Support Funding Framework is underfunded and overly bureaucratic, making it difficult for carers and children to secure the support they need, and sometimes funds are used for purposes other than to directly benefit children. Equitable, adequate and simplified supports and processes must be urgently put in place. The Centre recommends that the Victorian Government urgently commit to and fund equity of care allowances, brokerage, and client expenses across home-based placements and increase client support funds, accompanied by improved and streamlined processes.

64 OzChild 2019.

65 Ernst & Young (EY) Sweeney 2021, [Strong carers, stronger children – Victorian Carer Strategy: findings of the home-based carer census](#), EY Sweeney, Melbourne

66 Victorian Ombudsman 2017, [Investigation into the financial support provided to kinship carers](#), Victorian Ombudsman, Melbourne.

67 Ernst & Young (EY) Sweeney 2021.

Support for the child and family services workforce

Improving outcomes for children and families in Victoria relies heavily on our passionate and dedicated workforce. Key measures that would assist in building capability, resilience and sustainability for the child and family services workforce are described below.

Investing in a sustainable sector and capacity to meet demand

We know that the child and family services sector is under significant pressure and is faced with increasing demand from children and families in need, with around 1 in 3 families in need of support missing out. This is exacerbated by funding models that do not reflect the true cost of service delivery or provide room to be responsive to rapidly changing circumstances, and the COVID-19 pandemic. Services must have the capacity to respond to the flow-on effects of the pandemic, which could include higher levels of staff burnout or potential WorkCover implications.

The implementation of the Orange Door as a centralised intake service for family violence and child and family services has created visibility of the enormous demand for family support in Victoria. It has allowed us to begin to map the significant demand for services and has made visible just how many children are exposed to family violence daily. While men's and women's family violence services have seen increases in capacity, this has not been replicated in family services. Up to two-thirds of L17 referrals received have children included as exposed to or directly impacted by violence. While tier one triaging does prioritise children, the limited capacity in family services means that there is often little to no response for them.

The Centre recommends that the Victorian Government fund a sustainable sector by embedding indexation and CPI and superannuation increases in base funding, ensuring that funding keeps pace with demand, and allowing space for flexibility and innovation.

Sustainability also means funding dedicated roles to support the sector to implement key reforms without drawing existing resources away from service delivery. Implementation Lead roles must be established to lead significant sector change by providing staff coaching and mentoring to ensure the workforce are confidently applying new practices.

The Centre is calling on the Victorian Government to increase funding to family services by 25 per cent to prevent families from missing out on crucial support and ensure any remaining lapsing funding in family services is continued.

The urgent need for a child and family services workforce strategy

The Roadmap has seen the creation of 1,180 permanent new frontline child protection positions since 2014, and in August this year, a Child Protection Workforce Strategy was released to facilitate a stronger skills and recruitment pipeline for the statutory system. While this is welcome, there is an urgent need for a complementary workforce strategy for the child and family services sector.

Workforce supply continues to be a growing challenge for our sector, and one that is likely to be exacerbated by the pandemic. Our members frequently report difficulty in the staffing of programs right across Victoria, from Integrated Family Services to Men's Behaviour Change Programs, and often find that they are in a situation of 'robbing Peter to pay Paul'.

Reform in Victoria has resulted in the welcome expansion of needed support to children and families and has seen the creation of many more positions for child and family services professionals, but without a workforce strategy, these reforms are unable to be fully realised. Our members in the Orange Door tell us that workforce shortages mean that families in desperate need of assistance are being left behind.

There is also significant risk that mental health reforms will put further pressure on our sector unless plans are put in place now. While we strongly welcome the inclusion of family services in the three infant, child and family hubs, we must ensure that this does not create further recruitment challenges in other areas of the sector. Additionally, the establishment of new Early Parenting Centres will not be possible without a plan to expand the workforce.

The Centre recommends that the Victorian Government urgently invest in a workforce strategy to increase the supply and diversity of qualified professionals in the child and family services sector.

Availability of support for children and families no matter where they live

Too many children and families continue to miss out on supports because of where they live. Service access in regional and rural Victoria remains an ongoing challenge for our sector, exacerbated by funding models that do not account for geographical distance.

It is crucial that the Victorian Government consider the implications of population, demand and geographic distribution on service delivery and fund services in a way that meets local levels of need and plans for future growth. According to the Brotherhood of St Laurence:

Unmet demand for early years services in Melbourne's growth corridors, where many families of CALD background with young children reside, is considerable. With some 60-100 babies born weekly in outer growth corridors, essential infrastructure – including early years services – has not been able to keep pace with the burgeoning population.⁶⁸

Proportional investment in growth corridors is critical to ensuring adequate availability of support where and when it is needed. We also urge government to revisit population projections to determine the impact of the reported increase in people moving to the regions because of the pandemic, and alongside workforce considerations, government must make sure that enough home-based care placements are funded to meet the level of need for placements across the state.

Building strong leadership capability

Recent research shows the importance of organisational leadership in enabling and supporting the implementation of evidence-based programs and practice in our sector.⁶⁹ The critical role of leaders must be recognised, and the development of leadership capability supported to guide our sector toward better outcomes. The Centre has developed plans for a leadership entity that could meet sector needs for leadership capacity building by offering training, coaching and mentoring, and delivering a range of initiatives. To support the early establishment of the entity and to deliver key activities including CEO for a Day, a CEO Study Tour, and a masterclass with recognised leaders, funding for a dedicated full-time role will be required.

Supporting cross-sector collaboration - extending and embedding the Tri-Peaks Project

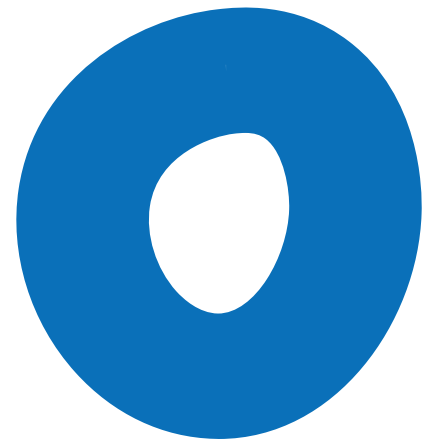
The Tri-Peaks Project is a collaboration between three peak bodies, the Centre, the Victorian Healthcare Association (VHA), and the Victorian Alcohol and Drug Association (VAADA). The project aims to support and promote good governance and integrated practices for common clients across the child and family, alcohol and other drug, and community health sectors. Tri-Peaks delivers a structured approach to supporting continuous improvement in governance and a shared understanding of the services, role and pathways across the three sectors, to support

68 Brotherhood of St Laurence 2019, *Submission to the Legal and Social Issues Committee of the Victorian Parliament inquiry into early childhood engagement of CALD communities*, Brotherhood of St Laurence, Melbourne, p. 10.

69 McCarthy, S & Griffiths, LJ 2021, 'How do leaders enable and support the implementation of evidence-based programs and evidence-informed practice in child welfare? A systematic literature review', *Human Service Organizations: Management, Leadership & Governance*, DOI: 10.1080/23303131.2021.1929626.

workforce development and improvement in integrated, safe, effective, and person-centred services. This includes a learning, development and knowledge building webinar series and a formal mentor program for board members, CEOs, executive and managers across the three sectors. Tri-Peaks also provides the Department of Families, Fairness and Housing (DFFH) and the Department of Health (DH) a forum to engage with the three sectors on key policy objectives and implementation strategies.

Tri-Peaks is managed by the Centre, supported by VHA and VAADA, and funded by DFFH and DH until 2022. This is important and valuable infrastructure for our sector that requires continuing commitment from government. The Centre is calling on the Victorian Government to invest \$500,000 per year plus a once-off \$196,000 to allow Tri-Peaks to address common challenges across the three sectors. With a primary goal of cross-sectoral workforce development and shared language, through activities designed to support recruitment, retention, training and succession through a cross-sectoral lens, Tri-Peaks provides a critical opportunity to strengthen three sectors and ultimately support common clients across the board.



Appendix

Summary of the Centre's 2022-23 budget recommendations

Governance

- Appoint a Minister for Children and Families with responsibility for improving outcomes for children and young people.
- Establish a whole-of-government taskforce to make sure that no child is left behind in the state's responses to and recovery from emergencies.

Family violence

- Invest in a dedicated family violence recovery service stream for children that provides an entitlement to support for all children who have experienced family violence.
- Invest in the expansion of locally based services that support recovery from violence for children.
- Invest in a significant expansion of the successful Caring Dads program.

Child abuse and neglect

- Expand the reach of specialist counselling and therapeutic, evidence-informed programs across the state for children who have experienced abuse and neglect.

Aboriginal children

- Establish a compact that would formalise a proportionate investment process across multiple service systems to enable Aboriginal organisations to keep Aboriginal children safe and supported.

Raise the age

- Raise the age of criminal responsibility to at least 14 years of age and expand interventions that effectively support children to reduce harmful behaviour and contact with the justice system such as Functional Family Therapy – Youth Justice (FFT-YJ) and Multisystemic Therapy (MST).

Children in regional areas

- Increase the number of publicly funded paediatricians and child psychologists in Victoria and locate the new positions in community health services, with priority given to regional and rural areas.

Early years

- Extend the Conveyance Allowance Program to kindergarten children so that their families and carers receive the financial support needed to overcome transport barriers to early childhood education and care.
- Adopt a state-wide approach to kindergarten enrolment, with a single, easily accessible and central enrolment process across Victoria.

- Invest in dedicated roles to support the development of baby playgroups to support new parents who have missed out on social connection during the pandemic.
- Fund Playgroup Victoria to continue and expand the Playgroup at Home LIVE program to better engage families with diverse challenges or barriers to playgroup and provide a platform to support soft re-entry to in-person engagement.
- Fund coordinator roles within Playgroups Victoria to connect with local councils across the state to regenerate community playgroups.
- Invest in a coordinator role to establish playgroups co-located in schools to assist with rebuilding school communities and with young children's transition into school.
- Support the development of intergenerational playgroups by funding a coordinator role to bring children into the aged care world to improve outcomes for children and older citizens.

Child victims of crime

- Develop appropriate and targeted programs to support child victims of crime.

Child sexual abuse

- Fund research on child sexual abuse prevention and the best treatment options for children in community settings.
- Invest in the development of specialist evidence-informed programs to target the prevention of child sexual abuse in the home.
- Fund the Power to Kids program to prevent sexual harm to children and young people in care.

Pre-birth service response

- Deliver a dedicated service response for all families who receive unborn reports to child protection.

Children with disability

- Extend and expand the Children with complex disability support needs program and Family Services Specialist Disability Practitioner roles to strengthen families and prevent children with disability from entering care.

Children and young people's education

- Provide ongoing funding for LOOKOUT Education Support Centres, LOOKOUT Career Education Advisors and LOOKOUT Early Childhood Learning Advisors (ECLAs), to enable targeted educational support for children in care.
- Invest in the capacity of LOOKOUT Centres to deliver timely educational needs assessments for children upon entry into care, and for children currently in care who have not had access.
- Provide four-year funding to continue expansion of the Raising Expectations program to support educational access and success for people with care experience.
- Invest in the expansion of targeted tutoring programs to make sure that all children and young people experiencing disadvantage and in care have access to one-on-one assistance from a qualified teacher to support their learning and engagement in school.
- Provide ongoing funding for the Navigator program and expand it to primary school aged children.

Child health

- Fund recommendation 24 of the Royal Commission into Victoria's Mental Health System so that each of the 13 Infant, Child and Youth Area Mental Health and Wellbeing Services can employ up to three specialist trauma practitioners and prioritise the infant- and child-focused mental health recommendations in the rollout of the new mental health system.
- Amend legislation to include a requirement for health assessments and follow up services for children entering care within a set time frame and implement a process to monitor compliance.
- Fund the state-wide expansion of the successful Pathway to Good Health multi-disciplinary clinics with recurrent funding for existing and new clinics to enable the sustainable delivery of health and mental health assessments and reviews for all children and young people in care and all children known to child protection.
- Expand the co-location of health clinicians within child protection and child, youth and family service teams state-wide.

Youth homelessness

- Fund new Education First Youth Foyers, with a particular focus on regional Victoria.

Evidence-based programs (EBPs) and evidence-informed practice approaches

- Invest in the expansion of EBPs that have proven to be successful with Victorian children and families, support the sector to commence delivery of other EBPs, and ensure their longevity by providing them with ongoing, recurrent funding.
- Invest in and work alongside the sector to develop an outcomes-focused, evidence-informed family capacity building framework for the delivery of family services across Victoria.
- Fund the Victorian and Aboriginal Family Preservation and Reunification Response at the level needed to be able to deliver on its objectives and potential.
- Invest \$5.3 million over the next three years to expand the reach, influence and impact of Victoria's Outcomes, Practice and Evidence Network (OPEN).

Supporting parents

- Invest in specialist workers in family services across each region of the state to support parents with intellectual disability in their parenting role.
- Fund FaPMI to deliver peer support programs such as CHAMPS and Space4Us.
- Invest in father-focused positions in family services teams across the state.

Culturally and linguistically diverse families

- Fund child and family services to provide culturally safe services through dedicated Practice Lead (CALD) positions within family services teams, and recruitment of a pool of bi-cultural and bilingual workers.

LGBTIQ+ community

- Commit \$20,000,000 per annum to a service delivery fund for LGBTIQ+ community-controlled health services.

- Fund the WithRespect LGBTIQ+ specialist service website to develop, publish and promote more resources for LGBTIQ+ people experiencing family violence, including resources on identifying, reporting and seeking support about family violence.
- Expand the LGBTIQ+ community education campaign launched during the 2020 Midsumma Festival across media and other outlets to raise awareness of family violence and available services and supports.
- Fund the Rainbow Tick accreditation of mental health services.
- Provide ongoing funding of \$500,000 per year for a program of research into LGBTIQ+ health and wellbeing, including tri-annual Privates Lives and Writing Themselves In surveys.

Children in poverty

- Advocate through National Cabinet for a permanent and adequate increase to social security payments so that families can meet their basic living expenses.
- Support local responses to material hardship and continue to fund initiatives to combat poverty, including ensuring that family services have sufficient brokerage to be responsive to the evolving needs of families.

Improving our care system

- Fund a pilot to enable a minimum of two community service organisations to take on authorisation.
- Fund family group conferencing for any family at risk of entering, or already involved in, the court system.
- Strengthen the care system by expanding Treatment Foster Care Oregon.
- Fully fund an effective and consistent therapeutic response for all children in residential care that meets actual operational costs of running residential care and continue to invest in the innovative and evidence-based models delivered by our sector to improve therapeutic responses for children in residential care.

Supporting carers

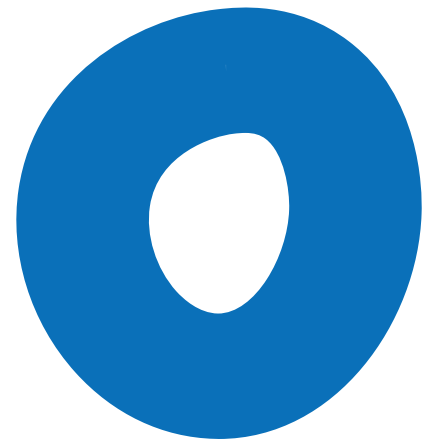
- Provide ongoing funding for the Carer Assistance Program delivered by the Foster Care Association of Victoria (FCAV), which is experiencing high demand, and invest in therapeutic support programs for kinship and permanent carers.
- Invest in the development and delivery of a peer support model for carers.
- Fund equity of care allowances, brokerage, and client expenses across home-based placements and increase client support funds, accompanied by improved and streamlined processes.

Voice of children, young people and parents

- Invest in full-time, paid, youth advisory positions in peak bodies across the community services sector.
- Establish and evaluate a youth-led pilot program for people with lived experience of residential care to serve as mentors for young people aged 13-17 years who are currently in residential care.
- Provide a long-term funding commitment for a scalable, system-wide mechanism to embed parental participation in development, design and delivery of child and family services for those parents with child protection contact.

Workforce and demand challenges

- Increase funding to family services by 25 per cent to prevent families from missing out on crucial support and ensure any remaining lapsing funding in family services is continued.
- Fund a sustainable sector by embedding indexation and CPI and superannuation increases in base funding, ensuring that funding keeps pace with demand, and allowing space for flexibility and innovation to respond to unmet need.
- Urgently invest in the development and implementation of a child and family services workforce strategy to increase the supply and diversity of qualified professionals.
- Fund and establish dedicated roles to support the sector to implement key reforms without drawing existing resources away from service delivery.
- Provide proportional investment in growth corridors to enable access to timely support where it is needed and fund services in a way that meets local levels of need and plans for future growth and population change.
- Make sure that enough home-based care placements are funded to meet the level of need for placements across the state.
- Fund the Centre to establish a leadership entity to build leadership capability in child and family services.
- Invest \$500,000 per year plus a once-off \$196,000 to allow Tri-Peaks to address common challenges across the child and family services, alcohol and other drug, and healthcare sectors.



Our members

- Jewish Care
- Kids First
- Good Shepherd Australia New Zealand
- Cohealth
- The Salvation Army SalvoCare Eastern
- Lighthouse Foundation
- Relationships Australia
- TaskForce Community Agency
- CareChoice (Aust) Pty Ltd
- Bethany Community Support
- Colac Area Health
- Camcare
- Brophy Family & Youth Services Inc
- Youth Support and Advocacy Service (YSAS) - Fitzroy
- Windermere Child & Family Services Inc.
- Safe Steps
- Family Access Network Inc
- Moira Inc
- Kara House
- Concern Australia
- Baptcare
- Rumbalara Family Services
- Jesuit Social Services
- Christian Brethren Community Care Ltd T/A
- Temcare
- City of Melbourne
- Drummond Street Services
- City of Yarra
- Victorian Aboriginal Community
- Controlled Health Organisation Inc. (VACCHO)
- Aruma (formerly E. W. Tipping Foundation/House with No Steps)
- Victoria Legal Aid
- Oz Child: Children Australia Inc
- Odyssey House Victoria
- Junction Support Services Inc.
- Make A Difference Dingley Village Inc.
- CatholicCare
- Kyabram Community & Learning Centre
- Key Assets
- Mallee Family Care
- Relationship Matters
- The Bridge Youth Service
- CatholicCare Sandhurst (formerly CentaCare Sandhurst)
- Brotherhood of St Laurence
- The Reach Foundation
- Eastern Domestic Violence Service (EDVOS)
- Anglicare Victoria
- Quantum Support Services Inc
- Gippsland Lakes Complete Health
- Permanent Care and Adoptive Families
- MacKillop Family Services
- Barwon Child, Youth & Family
- IPC Health
- Australian Childhood Trauma Group
- Tweddle Child and Family Health Service
- Berry Street

- UnitingCare Victoria and Tasmania
- The Alannah and Madeline Foundation
- ONCALL Personnel and Training
- VICSEG New Futures
- Bendigo Community Health Services
- Cobaw Community Health Service
- Life Without Barriers
- Zoe Support Australia
- Save the Children Australia
- Mirabel Foundation Inc
- Upper Murray Family Care
- Thorne Harbour Health
- EACH Social and Community Health
- City of Darebin
- City of Port Phillip - Family and Children's Services
- VANISH Inc.
- Victorian Association for the Care and Resettlement of Offenders (VACRO)
- Child and Family Services Ballarat
- Moonee Valley City Council - Family and Children's Services
- Community Living and Respite Services (CLRS)
- FamilyCare
- Benalla Rural City Council
- Doncare
- Bubup Wilam
- Melton City Council
- Australian Childhood Foundation
- Anchor Inc - Ringwood East
- The Salvation Army Crossroads - Coburg North
- Family Life
- Allambi Care Ltd
- No to Violence
- Caroline Chisholm Society
- Centacare Ballarat
- Queen Elizabeth Centre (QEC)
- Gippsland & East Gippsland Aboriginal Cooperative (GEGAC)

Subscriber members

- YMCA Victoria
- Council of Single Mothers and their Children
- Mansfield Shire Council
- Youth Affairs Council of Victoria (YACVic)
- Allah Muhammad Ali Fatima Hassan Hussain Federation
- Catholic Social Services
- Federation of Community Legal Centres (FCLC)
- Inner Eastern Local Learning & Employment Network
- The Pyjama Foundation
- Gunditjmara Aboriginal Cooperative
- Playgroup Victoria
- Kids Under Cover
- Settlement Services International
- Ability Assist