



Australian Government
Department of Social Services

A new approach to programs for families and children

Evidence Summary



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Evidence Summary

This paper outlines the research and evidence the Department of Social Services (the department) used to shape the proposed reforms in the Discussion Paper: *A new approach to children and family programs*.

It is structured into three sections, each presenting evidence related to:

- **Section A** covers the new program structure, including the three streams of the proposed single national program.
- **Section B** outlines the Australian Government's investment priorities.
- **Section C** details changes to how the department and service providers will work together.

This paper should be read alongside the **Consultation Summary**, which captures what we have heard through previous consultations. These insights have directly informed the proposed changes.

If you're using this paper to support your own research, we encourage you to refer to the original sources listed in the reference section at the end of the document.

A. A single national program with three streams

All families and children should have access to supports and appropriate interventions, with targeted 'back-ups' for those requiring more intensive supports.¹ This is known as a public health approach, which aims to prevent problems occurring in the first place, quickly respond to problems if they do occur, minimise any long-term effects, and prevent them occurring again.²

Combining interventions at different points in the system, and providing both prevention and treatment supports, generates stronger effects than one option alone.³ Service providers have shared that more families are coming to them in crisis or with complex needs. This has made it harder to focus on prevention and early intervention. Providers also said that strict grant requirements can limit their ability to offer flexible support – making it harder for children and families to get help when they need it most (see **Consultation Summary**).

The proposed single national program aims to better organise how the department funds child and family services. It is designed with flexibility in mind and to reflect what the evidence shows works best in delivering positive outcomes for children, families, and communities.



The three streams within the single national program are based on a proportionate universalism approach. This means mainstream services are delivered at a scale and intensity that matches community need. Services are therefore widely available, not only for the most disadvantaged, and can respond to the level of need.⁴ These streams are covered in more detail below.

Stream 1: National programs and information services

Families, children and young people in Australia need support at different stages of their lives. Providing high-quality, broad-based supports and services is essential to helping them thrive.

When services are widely available to everyone, they are more likely to be accessed.

Broad-based services, such as those available online, allow parents to access the information at times most convenient to them. This reflects the preferences of parents and caregivers, with 85% of parents saying they had accessed online information for parenting advice over the past 12 months.⁵

Services that focus on ‘primary’ prevention are especially effective at reaching children early and improving wellbeing across the population. By making support available before problems arise, local services have a greater chance of reaching children in need, which improves wellbeing and outcomes at a population level.⁶ Regular contact with general community services also helps providers identify families and children who may need extra support and connect them with the right services at the right time.

Access to up-to-date and evidence-informed information is essential for parents to feel empowered and make informed decisions. Some parents and caregivers believe there is not enough clear, evidence-informed and high-quality information.⁷ Other parents and caregivers report there is an overwhelming amount of information that is not tailored to their needs, making it harder for them to navigate.⁸ This has negative consequences for parents and caregivers, such as increased stress and/or anxiety, delayed decision-making, difficulty with parenting strategies, and reduced confidence in their parenting abilities.⁹

Making sure parents and caregivers have access to clear, high-quality information as early as possible can make a meaningful difference in their children’s lives. Early access to the right information can also help reduce the need for high-intensity or crisis services over time.

Stream 2: Prevention and early intervention

While the focus of a public health approach is to prevent problems before they happen by reaching the entire population, it also seeks to identify and address issues early when they do arise.¹⁰



Early intervention programs – also known as selective or indicated prevention – are designed for specific groups who show signs of being at risk of poor outcomes. It is accepted that services should ‘intervene wherever there is an effective intervention’ and ‘at strategic points in time’.¹¹ These programs aim to provide support early, before challenges become more serious.¹² This approach drives social and economic benefits by reducing long-term demand for more intensive services and improving overall wellbeing. For example, in 2024 Australia spent \$22.3 billion on late intervention for children and young people experiencing serious issues.¹³ This is equivalent to \$838 for every person in Australia every year, or \$2,704 for every child and young person.¹⁴

Investing in children and families before problems worsen will support them to become productive and engaged citizens. That means increased social cohesion, reduced inequality and cycles of disadvantage, improved social values, and better societal health.¹⁵ Supporting positive parenting behaviours can also have significant returns on investment, including increased productivity gains, health cost savings, child welfare savings, and reductions in crime.¹⁶

Stream 3: Intensive family supports

Some families, children and young people will need high-intensity support. These intensive family services are targeted interventions for those experiencing, or at greater risk of experiencing disadvantage or vulnerability. They provide help for people facing one or more existing challenges and build on the support already offered through broad-based and early intervention systems.

While investing in early intervention and prevention delivers the greatest long-term benefits and should be prioritised, it’s important to recognise that this doesn’t replace the need for late-stage and intensive services. These supports remain essential for families with more complex needs.

B. Prioritising investment

The Australian Government’s priorities are to:

1. Invest early to improve family wellbeing, break cycles of disadvantage, and reduce the need for later interventions – like child protection.
2. Prioritise connected, co-located, and integrated services that work together to meet family needs.
3. Ensure services are informed by, and respond to, community needs.
4. Improve outcomes for First Nations children and families by increasing the number of Aboriginal and Torres Strait Islander community-controlled organisations (ACCOS) delivering supports in locations with high First Nations populations.



These priorities will guide decisions about which programs and services are funded under the proposed single national program. They have been chosen based on strong evidence of where support can make the greatest positive difference for children, young people and families.

Improving family wellbeing

Within the public health approach, interventions are generally focused on addressing risk and increasing protective factors.¹⁷ Protective factors are conditions or attributes that support the healthy development and wellbeing of children, young people and families.¹⁸

Protective factors exist at different levels – including individual, family, community, and broader society – and each plays a role in supporting positive outcomes for children and families. Their absence or presence directly affects prenatal development, wellbeing and family dynamics.¹⁹ Safe, secure environments and relationships, especially in the early years, are a key protective factor in supporting the wellbeing and resilience of children and families and lay the foundations for healthy development and long-term positive outcomes.

Early intervention supports in the early years of a child's life (0-5 years)

As is well-known, the early years, from before birth to age five, are especially important for a child's development. Experiences during this time lay the foundation for lifelong learning, wellbeing and health. Improving outcomes in the early years helps to break cycles of disadvantage, prevent experiences of violence, address inequality and boost productivity.²⁰ Nationally, the early years is a period where children are more likely to enter the statutory out-of-home care system.²¹

What happens during childhood and adolescence sets the foundation for outcomes across the life course.²² Poor early childhood experiences can lead to physiological and behavioural changes, including to children's brain development and long-term outcomes.²³ This can include impairments in learning, memory and regulating behaviour, and chronic health conditions later in life such as heart disease, diabetes, depression and dementia.²⁴

Investing in proven, evidence-based interventions during the early years delivers the strongest return on investment compared to interventions later in life. Some studies propose a return of 15-17% for every dollar invested in preschool aged children. Antenatal interventions may have an even stronger return on investment.²⁵

Further information on the importance of the early years is outlined in the [Evidence Summary - Why Children and their Early Years Matter | Department of Social Services](#).



While the early years are critical, it's never too late to intervene. Support provided later in life can still be effective and deliver strong social and economic benefits, especially when tailored to individual needs. For example, middle childhood and adolescence are also crucial periods of development that offer opportunities to build strong cognitive, social, and emotional foundations that support children and young people.²⁶

Breaking entrenched cycles of disadvantage by supporting young parents (under 25)

Young parents are a group particularly at risk of negative outcomes, including social, economic and health disadvantage.²⁷ Compared to older mothers, young mothers are more likely to have lower educational attainment, lower earnings and poorer health.²⁸ Young mothers also experience more difficulties adjusting to becoming parents, possibly because they have fewer resources and life experiences to draw on.²⁹

Children of young parents also have a greater risk of experiencing poorer life outcomes.³⁰ Children born to teenage mothers are more likely to have low birth-weight and increased morbidity during their first year of life, to develop more behavioural problems than children of older mothers, and to be born into, and continue living in, social and economic disadvantage.³¹ Children of vulnerable young parents are also more likely to become young parents themselves and are more at risk of entering the care and protection system.³² For example, in New South Wales, there is a three in five chance a child born to a 20-year old mother will be known to child protection, a one in three chance they will be reported at risk of significant harm, and a one in 20 chance of being in out-of-home care. For children born to mothers younger than 20 years of age, the chance is even higher.³³

Young parenthood can further entrench problems and perpetuate a cycle of disadvantage for both the parent and child.³⁴ Supporting young parents in their parenting role has the potential to break cycles of disadvantage and improve outcomes for them and their children.³⁵

Families at risk of vulnerability, leading to interaction with the child protection system

Some families and children may be at risk of single or multiple factors that increase their vulnerability. For these families and children, addressing problems early can...

'...reduce the incidence of children and young people suffering the lifelong ill-effects of issues arising during childhood or reduce the severity of these issues. This then reduces the demand for spending on crisis services and chronic health interventions'.³⁶

For example, spending on child protection is the largest late intervention expense to governments, at \$10.2 billion in 2024 – which represents 43% of late intervention spending.³⁷



This cost of late intervention is not just a financial cost for government – it also represents significant costs in lost opportunities for children, young people and society.³⁸

Intervening early offers the greatest opportunity to improve outcomes for children, young people and families, and to help keep families together where it is safe to do so. It can also reduce the need for child protection involvement and the costs associated with late intervention.

Early intervention in this context can include:

- Intervening earlier with children and families experiencing vulnerability.
- Intensive family programs when there has been contact with the child protection system to prevent entry into statutory out-of-home care.³⁹

Under the National Agreement on Closing the Gap, there's a shared commitment to significantly reduce the number of Aboriginal and Torres Strait Islander children living in out-of-home care. The goal is to cut this number by 45% by the year 2031 (Target 12). Based on current child protection data from 2023-24, this means that by 2031, the number of Aboriginal and Torres Strait Islander children in out-of-home care could need to be roughly half of what it is today.

Connected, co-located and integrated services

The Early Years Strategy 2024-2034 recognises that service system complexity can be a barrier to support for families and children.⁴⁰ It notes that great services can be available, but they do not always work together, meaning some families may fall through the cracks.⁴¹ Services continue to be compartmentalised and cannot respond to the needs of families and children in a holistic and integrated way.⁴²

Integrated care can lead to better outcomes for children, families and service delivery. This includes:

- Improved school readiness, and parental knowledge and confidence from integrated early childhood services.⁴³
- Improved child academic outcomes for children attending co-located and integrated early years and primary school settings.⁴⁴
- Improved identification of developmental vulnerability and increased access to care for families who might not otherwise engage with these services, through integrated community-based hubs.⁴⁵



There are different ways to achieve integration. One way is through co-location, which involves physically placing two or more services on the same site. This can lower capital, operating and marginal costs and improve the quality of infrastructure.⁴⁶ There are also benefits for families and children, including reduced travel time, added convenience and improved transitions between services and through different life stages, such as from preschool to primary school.⁴⁷

Services informed by and responding to community need

People living in more disadvantaged communities have poorer outcomes across almost every social indicator,⁴⁸ including developmental vulnerability.⁴⁹

Complex and entrenched disadvantage is experienced by a small but persistent number of locations in each state and territory across Australia.⁵⁰ There are 235 communities in Australia that, together, comprise the top 10 per cent of disadvantage. Of those communities, 65 are estimated to be home to over half of Australians living in the most disadvantaged locations.⁵¹ These communities are diverse, and the factors driving disadvantage can vary widely.

While establishing the effectiveness of place-based initiatives can be challenging due to the shortage of rigorous outcome evaluations,⁵² some elements of successful place-based interventions have been identified.⁵³ These include:

- Community involvement in the program, including having a say in decisions – such as through community boards.
- Investment in community and workforce capacity building.
- Adequate funding and time to properly assess how well the program is working.
- Strong government leadership and support.
- Effective partnerships between stakeholders, recognising the vital role of community organisations, philanthropy, social enterprises and local leadership groups in creating change.⁵⁴



Improving outcomes for Aboriginal and Torres Strait Islander children and families

Aboriginal and Torres Strait Islander children and families are affected by socioeconomic inequities, including in employment, education, housing, health, and justice.⁵⁵ Aboriginal and Torres Strait Islander children are more likely to be in out-of-home care, and experience poorer psychological, physical and social outcomes as a result,⁵⁶ compared to non-Indigenous children. Aboriginal and Torres Strait Islander children are also more likely to start school developmentally vulnerable.⁵⁷

Evidence has found that ACCO health services offer greater health benefits than equivalent services delivered through mainstream providers. This is because services are culturally informed and community-led.⁵⁸ The lifetime health impact of ACCO-delivered interventions is estimated to be 50% greater than if delivered by mainstream health services, mostly because of improved access by Aboriginal and Torres Strait Islander people.⁵⁹

ACCOs deliver services using a holistic model of care, are accountable to their communities, deliver high quality, responsive and culturally safe services, and their position as preferred provider in their communities ensures higher levels of engagement with service users.⁶⁰

Further information on strengthening the community-controlled sector, including evidence of the effectiveness of ACCOs, is outlined in the [Review of the National Agreement on Closing the Gap Study report: Supporting paper](#).

Assessment of need

There have been calls to reform funding approaches to recognise the level of need in a community, rather than allocating funding based on the number of people in a community.⁶¹ The following datasets, along with local knowledge and data sources from states, territories and local councils, will help identify community needs.

Socio-Economic Indexes for Areas (SEIFA)

SEIFA combines Census data, including income, education, employment, occupation, housing and family structure to provide a score (and rank) of how relatively advantaged or disadvantaged that area is, compared with other areas.⁶² A lower index score indicates that an area has more disadvantage relative to other areas with a higher score.⁶³ You can read more about SEIFA, including the latest release, here: [Socio-Economic Indexes for Areas \(SEIFA\), Australia, 2021 | Australian Bureau of Statistics](#).



Census data, including the number of children and families living in a community, and the number of young people Not in Education, Employment or Training (NEET)

Census data on children and families will help assess community needs and potential demand in each location.

The term NEET refers to a young person who is neither engaged with any education or training nor in paid employment.⁶⁴ Young people who are not in education, employment or training by the age of 24 are most at risk of experiencing future long-term unemployment.⁶⁵ Long-term outcomes of unemployment can include:

- Poor physical and mental health.
- Family disruption.
- Decreased social participation.
- Poor attainment and wellbeing for the children of unemployed parents.⁶⁶

On average, by the age of 24, 15% of Australians are not in education, employment or training.⁶⁷ But this rate varies across different groups of young people. For example:

- Around one in three Australians aged 24 from the lowest socio-economic backgrounds are NEET, compared to one in 15 from the highest socio-economic backgrounds.⁶⁸
- A higher percentage of young people living in remote areas are NEET compared to young people living in major cities.⁶⁹
- 45% of Aboriginal and Torres Strait Islander young people were recorded as NEET, compared to 14% for non-Indigenous young people.⁷⁰



Australian Early Development Census (AEDC)

The AEDC is a nationwide census of early childhood development. It provides important insights into child development and wellbeing from a local community level to a national level.⁷¹ The five key AEDC areas – known as domains – can predict later mental health, wellbeing and educational achievement for children.⁷²

The 2024 results from the AEDC show that more children are developmentally vulnerable, with 23.5% of children vulnerable on one or more domain, and 12.5% vulnerable on two or more domains.⁷³ Social competence and emotional maturity have declined – key skills children need to manage emotions, build relationships, and engage in learning. More children are starting school developmentally vulnerable, with the percentage of children on track across all five domains dropping from 52.9% in 2024, down from nearly 54.8%.⁷⁴

You can read more about the AEDC, including the latest results, in the [2024 AEDC National Report](#). You can also find AEDC results for your local community, suburb or region using the [Community Data Explorer](#).

Rates of engagement with child protection agencies

In 2023-24, 307,022 children aged 0-17 years were subject to notifications of alleged mistreatment, and 44,866 were in out-of-home care.⁷⁵ High-quality, evidence-based early support can strengthen parenting and family wellbeing, while easing pressure on crisis services.

Currently, the department only has access to child protection data at the state and territory level. More detailed local data – such as rates of notifications, investigations, and substantiations – would help governments better target services to areas of greatest need.

C. Working together

Streamlined reporting arrangements

Grant reporting

Social services often spend a lot of time and money on reporting – mainly because of overlapping requirements and the need to provide data that doesn't always help improve service quality or delivery. In 2016, the Victorian Council of Social Services reported that charities spend on average 291 paid staff hours and 47 unpaid hours a year on reporting to government agencies.⁷⁶ For large organisations, this can be as much as 537 paid staff hours.

In more recent consultations with community sector organisations, providers highlighted the significant reporting burdens they experience. You can read more about this in the **Consultation Summary**.



Pillar 3 of the Community Sector Grants Engagement Framework, commits to reducing administrative burden, making processes more efficient so organisations can spend more time delivering real outcomes for communities.

Outcomes reporting

Measuring the impact of services is essential to make sure government funding goes to what works best for children, young people and families.

The Community Sector Grants Engagement Framework supports this by designing grant activities around clear outcomes and linking reporting directly to those goals. This approach also helps government connect policy decisions with wellbeing measures, as outlined in *Measuring What Matters: Australia's First Wellbeing Framework (Measuring What Matters)*.

You can read more about the Community Sector Grants Engagement Framework here: [Community Sector Grants Engagement Framework](#) and about Measuring What Matters here: [Measuring What Matters](#).

Alternative ways of commissioning

Relational contracting is an alternative to a transactional contract traditionally used between government and service providers. There are calls from the sector to move towards a relational model of service delivery (built on trust and collaboration) to achieve better outcomes for children and families.⁷⁷

One of the benefits of relational contracting is its flexibility. Instead of focusing on rigid processes, it prioritises achieving shared goals – allowing services to adapt how they get there. This is especially valuable in social services, where complex and changing needs mean families and children often benefit from tailored, responsive approaches.

While the evidence-base for relational contracting in an Australian social services context is still developing, there have been positive outcomes from the use of relational contracting overseas. For example, a quasi-experimental study in northern England found a relational contracting approach to be both less costly and more effective in achieving outcomes, despite higher transaction costs associated with implementing a new approach.⁷⁸



Conclusion

This paper has outlined the research and evidence that informed the Australian Government's proposed reforms to children and family programs, as set out in the *Discussion Paper: A new approach to children and family programs*. Drawing on insights from previous consultations and structured across three key areas—program structure, investment priorities, and new ways of working with service providers—the paper provides a foundation for meaningful reform.

These findings should be considered alongside the *Consultation Summary*, which captures the voices and experiences of stakeholders and communities. Together, they shape a reform agenda that is grounded in evidence and focused on improving outcomes for children and families.



References

- ¹ Australian Institute of Family Studies (AIFS), [The public health approach to preventing child maltreatment](#), AIFS, 2016, accessed 17 October 2025.
- ² AIFS, 'The public health approach to preventing child maltreatment'.
- ³ JS Ringel, D Schultz, J Mendelsohn, SB Holliday, K Sieck, I Edochie and L Davis, '[Improving Child Welfare Outcomes: Balancing Investments in Prevention and Treatment](#)', *RAND Health Quarterly*, 2018, 7(4):4, accessed 17 October 2025.
- ⁴ M Marmot, J Allen, P Goldblatt, T Boyce, D McNeish, M Grady and I Geddes, [Fair Society, Healthy Lives: The Marmot Review: Strategic Review of Health Inequalities in England post-2010](#), 2010, accessed 17 October 2025.
- ⁵ Parenting Research Centre, [Parenting Today in Victoria: Technical Report](#), Parenting Research Centre, 2022, accessed 17 October 2025.
- ⁶ S Fox, A Southwell, N Stafford, R Goodhue, D Jackson, C Smith, [Better systems, better chances: A review of research and practice for prevention and early intervention](#), Australian Research Alliance for Children and Youth (ARACY), Canberra, 2015, accessed 17 October 2025.
- ⁷ JWS Research, *Parent access to, and preferences for, information: Research report*, report to the Australian Government Department of Social Services, JWS Research, unpublished, 2024.
- ⁸ JWS Research, *Parent access to, and preferences for, information: Research report*.
- ⁹ JWS Research, *Parent access to, and preferences for, information: Research report*.
- ¹⁰ AIFS, 'The public health approach to preventing child maltreatment'.
- ¹¹ T Moore and F Oberklaid, 'Investing in Early Childhood Education and Care: The Health and Wellbeing Case', in P Peterson, E Baker and B McGaw (eds) *International Encyclopedia of Education*, Vol 2, Elsevier, 2010.
- ¹² C Strawa, [Effective parenting programs: What does the evidence say?](#), Australian Institute of Family Studies, 2025, accessed 17 October 2025.
- ¹³ O'Connell, *The Cost of Late Intervention in 2024*.
- ¹⁴ O'Connell, *The Cost of Late Intervention in 2024*.
- ¹⁵ S Fox, A Southwell, N Stafford, R Goodhue, D Jackson, C Smith, [Better systems, better chances: A review of research and practice for prevention and early intervention](#), Australian Research Alliance for Children and Youth (ARACY), Canberra, 2015, accessed 17 October 2025.
- ¹⁶ Fox et al., *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention*.
- ¹⁷ C Strawa, [Preventing and reducing child maltreatment: The common and most effective elements of parenting programs](#), Australian Institute of Family Studies, 2025, accessed 17 October 2025.
- ¹⁸ Australian Institute of Family Studies (AIFS), [Risk and protective factors for child abuse and neglect](#), AIFS, 2017, accessed 17 October 2025.
- ¹⁹ Center on the Developing Child at Harvard University, [Three Principles to Improve Outcomes for Children and Families: 2021 Update](#), Center on the Developing Child at Harvard University, 2021, p 3, accessed 17 October 2025.
- ²⁰ World Bank Group, [Early Years: The Foundation for Human Capital](#), World Bank Group website, n.d., accessed 17 October 2025.
- ²¹ Australian Institute of Health and Welfare (AIHW), [Child protection Australia 2023–24 Supplementary Data Tables: Table S4.3: Children admitted to care and protection orders, by age group and state or territory, 2023–24](#) [data set], AIHW, Australian Government, 30 September 2025, accessed 20 October 2025.
- ²² LG Irwin, A Siddiqi and C Hertzman, [Early Childhood Development: A Powerful Equalizer: Final Report for the World Health Organization's Commission on the Social Determinants of Health](#), World Health Organisation, 2007, accessed 17 October 2025.



- ²³ National Scientific Council on the Developing Child, [Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined: Working Paper No. 15](#), Center On The Developing Child at Harvard University, 2020, accessed 18 July 2025; DG Blanchflower and A Bryson, [The Effects of Adverse Childhood Experiences on Adults' Subjective Wellbeing](#), IZA - Institute of Labor Economics, 2023, accessed 18 July 2025.
- ²⁴ National Scientific Council on the Developing Child, *Connecting the Brain to the Rest of the Body: Early Childhood Development and Lifelong Health Are Deeply Intertwined: Working Paper No. 15*.
- ²⁵ Fox et al., *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention*.
- ²⁶ Fox et al., *Better Systems, Better Chances: A Review of Research and Practice for Prevention and Early Intervention*.
- ²⁷ H Hoffmann, RE Olson, F Perales and J Baxter, 2020, '[New mothers and social support: A mixed-method study of young mothers in Australia](#)', *Journal of Sociology*, 2020, doi:10.1177/1440783320978706, accessed 17 October 2025.
- ²⁸ Hoffmann et al., 'New mothers and social support: A mixed-method study of young mothers in Australia'
- ²⁹ Hoffmann et al., 'New mothers and social support: A mixed-method study of young mothers in Australia'
- ³⁰ Hoffmann et al., 'New mothers and social support: A mixed-method study of young mothers in Australia'
- ³¹ Australian Institute of Health and Welfare (AIHW), [National Framework for Protecting Australia's Children 2009-2020: technical paper on operational definitions and data issues for key national indicators](#), AIHW, Australian Government, 2013, accessed 17 October 2025.
- ³² JL Marino, LN Lewis, M Hickey, SR Skinner and D Bateson, '[Teenage mothers](#)', *Australian Family Physician*, 2016, 45(10):712-717, accessed 20 October 2025; Department of Communities and Justice (DCJ), [Impact of maternal age on children coming into contact with the child protection system: Evidence to Action Note \[PDF 510KB\]](#), DCJ, New South Wales Government, 2021, accessed 17 October 2025.
- ³³ DCJ, *Impact of maternal age on children coming into contact with the child protection system: Evidence to Action Note*.
- ³⁴ R Price-Robertson, [Supporting young parents: practice guide](#), Australian Institute of Family Studies, 2010, accessed 17 October 2025.
- ³⁵ Parenting Research Centre and Murdoch Childrens Research Institute, [Young parents and parenting support: Submission to the National Children's Commissioner](#), Melbourne, Australia, 2017, accessed 17 October 2025.
- ³⁶ M O'Connell, [The Cost of Late Intervention in 2024 \[PDF 1,594KB\]](#), The Front Project, Melbourne, 2025, accessed 17 October 2025.
- ³⁷ O'Connell, *The Cost of Late Intervention in 2024*.
- ³⁸ O'Connell, *The Cost of Late Intervention in 2024*.
- ³⁹ Social Ventures Australia, [Full report: The economic case for early intervention in the child protection and out-of-home care system in Victoria](#), Berry Street, 2019, accessed 20 October 2025.
- ⁴⁰ Department of Social Services (DSS), [The Early Years Strategy 2024-2034](#), DSS, Australian Government, 2024, accessed 20 October 2025.
- ⁴¹ DSS, *The Early Years Strategy 2024-2034*.
- ⁴² Moore, *Core Care Conditions for Children and Families: Implications for policy and practice*.
- ⁴³ P Sammons, J Hall, R Smees, J Goff, K Sylva, T Smith, M Evangelou, N Eisenstadt and G Smith, [The impact of children's centres: studying the effects of children's centres in promoting better outcomes for young children and their families: evaluation of Children's Centres in England \(ECCE, Strand 4\): research report](#), University of Oxford, 2015, accessed 20 October 2025.
- ⁴⁴ S Newman, J McLoughlin, H Skouteris, C Blewitt, E Melhuish and C Bailey, '[Does an integrated, wrap-around school and community service model in an early learning setting improve academic outcomes for children from low socioeconomic backgrounds?](#)', *Early Child Development and Care*, 2022, 192(5):816-830, doi:10.1080/03004430.2020.1803298, accessed 20 October 2025.



- ⁴⁵ K Edwards, R Fernandez, T Rimes, L Stephenson, R Smith, J Son, V Sarkozy, D Perkins, V Eapan and S Woolfenden, '[Happy, Healthy, Ready – working with early childhood non-government organisations for developmental surveillance for vulnerable children](#)', *Australian Journal of Advanced Nursing*, 2020, 37(4):37-46, doi:10.37464/2020.374.277, accessed 20 October 2025.
- ⁴⁶ Department of Education and Training, [Co-location and other integration initiatives: Strategic evaluation: A summary report \[PDF 1,480KB\]](#), Department of Education and Training, State Government of Victoria, 2015, accessed 20 October 2025.
- ⁴⁷ Department of Education and Training, *Co-location and other integration initiatives: Strategic evaluation: A summary report*.
- ⁴⁸ Victorian Council of Social Service (VCOSS), [Communities taking power: Using place-based approaches to deliver local solutions to poverty and disadvantage \[PDF 656KB\]](#), VCOSS, 2016, accessed 20 October 2025.
- ⁴⁹ VCOSS, *Communities taking power: Using place-based approaches to deliver local solutions to poverty and disadvantage*.
- ⁵⁰ R Tanton, L Dare, R Miranti, Y Vidyattama, A Yule and M McCabe, [Dropping Off the Edge 2021: Persistent and multilayered disadvantage in Australia](#), Jesuit Social Services, Melbourne, 2021, accessed 20 October 2025.
- ⁵¹ Australian Bureau of Statistics, [Socio-Economic Indexes for Areas \(SEIFA\): Table 2 Statistical Area Level 2 \(SA2\) Index of Relative Socio-economic Disadvantage, 2021](#) [data set], ABS Website, 2021, accessed 20 October 2025.
- ⁵² LA O'Dwyer, F Baum, A Kavanagh and C Macdougall, '[Do area-based interventions to reduce health inequalities work? A systematic review of evidence](#)', *Critical Public Health*, 2007, 17(4):317-335, doi:10.1080/09581590701729921, accessed 20 October 2025.
- ⁵³ Centre for Community Child Health, [Place-based approaches to supporting children and families \[PDF 311KB\]](#), The Royal Children's Hospital, Melbourne, 2011, accessed 20 October 2025.
- ⁵⁴ Centre for Community Child Health, *Place-based approaches to supporting children and families*.
- ⁵⁵ SNAICC, *Stronger ACCOs, Stronger Families: Final Report*.
- ⁵⁶ S Creamer, S Blair, M Toombs and CE Brolan, '[Indigenous services leading the way for Aboriginal and Torres Strait Islander children in out-of-home care](#)', *Social Work Education*, 2022, 43(4):913-937, doi:10.1080/02615479.2022.2155129, accessed 20 October 2025.
- ⁵⁷ Department of Education, [2024 Australian Early Development Census National Report](#), Department of Education, Australian Government, 2025, accessed 20 October 2025.
- ⁵⁸ Productivity Commission, [Review of the National Agreement on Closing the Gap](#), Study Report, Supporting Paper, Productivity Commission, Australian Government, 2024, accessed 20 October 2025.
- ⁵⁹ Productivity Commission, *Review of the National Agreement on Closing the Gap*,
- ⁶⁰ SNAICC, *Stronger ACCOs, Stronger Families: Final Report*.
- ⁶¹ Anglicare Australia, [In Every Community: Delivering Services Outside Our Cities](#), Anglicare Australia, 2025, accessed 20 October 2025.
- ⁶² Australian Bureau of Statistics (ABS), [Socio-Economic Indexes for Areas \(SEIFA\): Technical Paper](#), ABS Website, 2021, accessed 20 October 2025.
- ⁶³ ABS, *Socio-Economic Indexes for Areas (SEIFA): Technical Paper*.
- ⁶⁴ C Strawa, [Supporting young people experiencing disadvantage to secure work](#), Australian Institute of Family Studies, 2022, accessed 20 October 2025.
- ⁶⁵ Strawa, *Supporting young people experiencing disadvantage to secure work*.
- ⁶⁶ Australian Institute of Health and Welfare (AIHW), [Australia's Youth: Engagement in education or employment](#), AIHW, Australian Government, 2021, accessed 20 October 2025.
- ⁶⁷ Strawa, *Supporting young people experiencing disadvantage to secure work*.
- ⁶⁸ Strawa, *Supporting young people experiencing disadvantage to secure work*.
- ⁶⁹ Strawa, *Supporting young people experiencing disadvantage to secure work*.
- ⁷⁰ Strawa, *Supporting young people experiencing disadvantage to secure work*.



⁷¹ Australian Early Development Census (AEDC), [AEDC Summary](#), AEDC, Australian Government, 2024, accessed 20 October 2025.

⁷² AEDC, *AEDC Summary*.

⁷³ Department of Education, [2024 Australian Early Development Census National Report](#), Department of Education, Australian Government, 2025, accessed 20 October 2025.

⁷⁴ Department of Education, *2024 Australian Early Development Census National Report*.

⁷⁵ Steering Committee for the Review of Government Service Provision (SCRGSP), [Report on Government Services 2025: Part F, Section 16: Child protection services](#), Productivity Commission, 2025, accessed 20 October 2025.

⁷⁶ M Sayers and D Mukherjee, [More than charity: Victoria's community sector charities](#), Victorian Council of Social Services, 2016, accessed 20 October 2025.

⁷⁷ The Possibility Partnership, [Unlocking better outcomes for children through a more relational Human Services model](#), The Possibility Partnership, n.d., accessed 20 October 2025.

⁷⁸ M Patouna, E De Gruyter and E Carter, [Kirklees Better Outcomes Partnership: Understanding the effects of person-centred service reforms in housing support](#), Government Outcomes Lab, Blavatnik School of Government, University of Oxford, 2025, accessed 20 October 2025.