

Are you an individual or making a submission on behalf of an organisation?

Organisation

Organisation name

Deaf Connect

Is your organisation....?

- Commonwealth, state or territory or local government agency or body

What type of service or support do you mostly provide?

- A national program and/or information service
- Prevention or early intervention services

What state or territory does your organisation deliver services and supports in?

- New South Wales
- Queensland
- Western Australia

Where does your organisation deliver most of their services and supports?

Major city

1. Does the new vision reflect what we all want for children and families?

Deaf Connect supports the program's vision as reflective of what all children and families need to thrive with health and resilience: access to language, cultural belonging, and an informed, empowered support network. About 95% of deaf children are born to hearing parents are likely to be unaware of the risks of language deprivation and developmental delay without full access to communication and bilingual language development.

2. Are the two main outcomes what we should be working towards for children and families? Why/Why not? - Outcome 1: Parents and caregivers are empowered to raise healthy, resilient children - Outcome 2: Children are supported to grow into healthy, resilient adults.

For deaf children and families, this program provides the opportunity to realise the outcomes as below:

1. Outcome 1: Parents and caregivers are empowered to raise healthy, resilient children. This begins when families are supported to communicate in a shared language through early intervention and bilingual (signed and spoken) language development.

2. Outcome 2: Children are supported to grow into healthy, resilient adults. Through early access to sign language fosters cognitive, emotional, and social development, building identity, confidence, and long-term wellbeing.

Furthermore, the vision and outcomes align with family-centred care principles and international human rights frameworks including:

- The Convention on the Rights of the Child (Article 27) upholds the government's responsibility to provide family support for deaf children's development and (Article 30) protects the rights of linguistic minorities to enjoy their culture and use their language including the Deaf community and Auslan.
- The International Covenant on Civil and Political Rights (Article 27) protects the rights of linguistic minorities, including deaf children, to use and learn Auslan.
- The Convention on the Rights of Persons with Disabilities (Articles 2, 21b, 21e, 23.3, and 24.3b) affirms sign languages as equal to spoken languages and requires governments to promote their use, foster Deaf cultural identity, and ensure families have early access to information and bilingual education.

3. Will a single national program provide more flexibility for your organisation?

Deaf Connect strongly supports the introduction of a single national Families and Children (FaC) program which would enhance consistency of supports across jurisdictions and meet needs of specialist cohorts through enabling of partnerships between specialist and geographic/generalist providers.

At present, access for deaf children and parents is inconsistent across the five existing Australian Government programs. While these programs operate under national frameworks, service delivery is typically defined by state or local government catchments. This model does not adequately support the demand for specialist providers such as Deaf Connect, whose services are often concentrated in metropolitan areas or limited to specific local government boundaries. For this reason, Deaf Connect recently declined to proceed with the NSW based Community and Families Support program contract delivering our Parent to Parent Program as restrictive LGA boundaries prevent us from operating in good faith for a specialist cohort. Our current service offerings are outlined below:

- Queensland:
 - o Healthy Hearing Monitoring program providing speech pathology assessment services contracted by the Department of Health

- o Hear for Kids in School providing speech pathology and occupational therapy in conjunction with public education contracted by the Department of Education

- New South Wales:

- o Parent to Parent Support Program connects new parents with experienced parents of deaf children for advice and support contracted by the Department of Communities and Justice

- o Family Mentor Program provides information and referrals as well as providing deaf mentors to guide bilingual language development in Auslan and English as contracted by the Department of Communities and Justice

- Western Australia:

- o LEAP program providing a bilingual and bicultural playgroup through a contract with the Department of Social Services

- o Parent Mentor Program through a contract with Stan Perron Donation

4. Does the service or activity you deliver fit within one of the three funding streams? Do these streams reflect what children and families in your community need now – and what they might need in the future?

Deaf Connect's services align primarily with Stream 1 (National Programs and Information Services) and Stream 2 (Prevention and Early Intervention), with a stronger emphasis on Stream 2 as per the Evidence Summary.

Within the context of hearing loss, the key risk factor is not hearing loss itself but language deprivation which occurs when deaf children are not accessing full communication or language development opportunities particularly incidental learning.

Deaf Connect's model focuses on prevention by supporting bilingual language development—Auslan and English—and early communication access as core protective and developmental approaches. Through family-centred and community-connected services, the Deaf Connect proactively addresses language deprivation and the developmental delays of deaf children that can occur due to delayed or inadequate early intervention as well as supporting families of deaf children with the knowledge and skills to raise them.

5. Are there other changes we could make to the program to help your organisation or community overcome current challenges?

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Deaf Connect recommends that the program be designed without restrictive geographic or local government area (LGA) contract boundaries or alternatively allow contract variations for specialist providers. Removing these limitations

would significantly improve accessibility. Deaf children and their families often reside outside established catchment areas, which restricts their access to essential supports. A more flexible contracting approach would enable specialist organisations such as Deaf Connect to collaborate with local providers across jurisdictions, ensuring services are delivered equitably, inclusively, and consistently to all deaf children and families nationwide.

Further to this, a key challenge for service delivery is the contract duration and performance measurement. One-year contracts present significant challenges for staff retention and staff quality as short contracts create uncertainty for employees. This is particularly a critical issue for a specialist workforce who are seeking stability and career development. This instability can lead to loss of expertise, disruption in relationships with children and families as well as increased onboarding requirements.

When contracts are limited to a single year, providers are forced to focus on immediate outputs rather than long-term impact, which compromises the overall effectiveness of specialist service delivery. This issue is compounded by program performance measures that rely heavily on volume-based metrics which risk undervaluing the depth of impact and meaningful outcomes achieved by that specialist providers, like Deaf Connect. Our service model does not operate at the same scale as generalist providers and this misalignment has been an ongoing challenge in our contracts where reporting frameworks fail to reflect the unique needs of deaf children and their families.

To address this, the adoption of impact- and outcome-focused evaluation metrics is essential to ensure the true value of our service delivery is recognised, and the broader needs of deaf children and families are acknowledged otherwise they risk being excluded in program reporting.

23. Is there anything else you think the department should understand or consider about this proposed approach?

Deaf Connect supports the program's vision, outcomes and its public health approach adopted from the Evidence Summary which aligns with the critical issue we see for deaf children; the key risk factor is not hearing loss itself but language deprivation which occurs when deaf children are not accessing full communication access or language development opportunities especially incidental learning.

The new program's public health prevention model would create cohesive early intervention systems to reduce language deprivation and developmental delays. This alleviates system pressures and costs on overburdened health services (e.g.,

speech pathology and psychology waitlists), NDIS disability funding (therapy escalations), and education systems (literacy/catch-up interventions) by streamlining national funding, reducing jurisdictional silos, and fostering equitable outcomes.