

Consultation Paper:

A new approach to programs for families and children

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1. Introduction

HelpingMinds welcomes the opportunity to provide feedback on *A New Approach to Programs for Families and Children*.

As a community-managed organisation with nearly 50 years of experience, HelpingMinds has been delivering services under the Family Mental Health Support Service – known as our YoungMinds program – for more than a decade across the City of Swan, Midwest, Gascoyne, and Kimberley regions of Western Australia.

Since commencement, HelpingMinds has supported 3,601 individual children and young people, delivering 42,090 attendances and facilitating 24,449 sessions. These figures reflect not only the scale of our work but also the depth of engagement and trust built with children, young people, families, and communities, across both metro, regional, remote and very remote areas of Western Australia.

HelpingMinds was also a key stakeholder in the national Families and Children (FaC) Activity working group for the Family Mental Health Support Service held in 2024.

In addition to this, HelpingMinds provides support services to individuals, families, and carers impacted by mental health challenges, aged 7+ to older adults, providing person-centred support through advocacy, counselling, respite, education, and peer-led programs. Our services are grounded in compassion, connection, and recovery, and are designed to empower people to navigate their own wellbeing journeys with dignity and choice.

HelpingMinds is also the lead organisation for the Western Australian Recovery College Alliance, delivering education and support based on the principles of relational recovery—a model that recognises the importance of connection, meaning, and belonging in recovery.

Our work is informed by both lived and living experience and clinical expertise, and we are committed to co-designing services that are trauma-informed, culturally responsive, and inclusive.

We believe our long-standing presence and expertise place us in a strong position to provide meaningful insights and what needs to be considered for any future recommendations for the new approach to programs for families and children.

2. Feedback Discussion: One new national program

2.1. Funding uncertainty and transition risks

Shifting to a new national model introduces significant funding uncertainty and transition risks that could disrupt the continuity of care for vulnerable families. The Department advises current contracts will only be extended until 30 January 2027, which falls midway through the financial year. This misalignment creates operational and budgeting challenges for service providers, particularly those managing multi-year programs and workforce planning.

The absence of a clear crossover period between existing services and the proposed new model raises concerns about service gaps and continuity of care. Without a structured transition plan, families currently receiving support may experience interruptions in care, and new referrals may be delayed or lost in the system.

Service disruption risks undermine the strong relationships that have already been developed with schools, stakeholders, communities, children, young people, and families. These relationships take a great deal of time, effort, and trust to build, particularly in regional areas. Once established, they are a critical foundation for effective service delivery, and disruption can cause significant setbacks to engagement and outcomes.

Organisations that have consistently delivered outstanding outcomes risk losing funding not due to performance, but because of structural changes and competitive re-tendering processes. This undermines the stability of trusted relationships built over years and may discourage innovation and long-term investment in community-led approaches.

The timeline is particularly challenging for regional and remote providers, who face additional barriers in recruitment, training, and retention. Workforce uncertainty, especially in specialist roles such as child and family counsellors, may lead to staff attrition, reduced morale, and difficulty attracting qualified professionals.

At a minimum, contracts should have been extended to 30 June 2027 to align with the financial year and allow for a more orderly transition. This would provide organisations with the time needed to plan, consult, and adapt without compromising service delivery or workforce stability.

2.2. Loss of specialisation

While we acknowledge the importance of flexibility and adaptability in service delivery and while we appreciate there can be benefits to a single national initiative, the consolidation of five distinct programs (FMHSS, CaPS, CfC FP, FaRS, and SFVS) raises concerns about the potential loss of specialisation. Each of these programs has been designed to address specific and complex needs: mental health support, parenting capacity-building, family violence intervention, relationship strengthening, and place-based community development.

Merging these into one overarching framework risks diluting the specialised expertise that has been critical to achieving positive outcomes for high-risk cohorts. Vulnerable children and families often require nuanced, targeted interventions that cannot be effectively delivered through a generic or one-program-fits-all model.

Importantly, diversity can be a strength. It allows families to exercise choice and control, accessing services that best meet their unique needs and cultural contexts.

2.3. Service Implementation and Models

We note that there is no confirmation and little detail on what this commitment looks like in practice as a service or what models would be anticipated to be utilised. Without clearer direction or proposal of how services will operate day-to-day, it is difficult to assess whether community needs will be met.

Greater clarity is required on the practical models of delivery, including where services will be located, how they will be staffed, and how responsiveness to community voice will be measured. Importantly, services must be equitable across all areas, recognising that even within regions there are unique challenges that require tailored approaches.

To ensure accountability and effectiveness, outcomes must clearly demonstrate how the consolidated program will continue to deliver specialised, tailored support. This includes tracking outcomes by cohort, maintaining service streams that reflect the original program strengths, and ensuring that frontline staff retain the capacity and training to respond to diverse needs.

2.4. Recognition of established service providers

There should be consideration for services that have already established a strong history of delivering programs within local communities. Recognising the value of longstanding providers helps maintain trust, continuity, and stability for families, while ensuring that proven expertise and relationships are not lost through funding or tendering processes.

From our experience, it takes years to establish rapport and trusted relationships within communities. Providers with a strong track record, such as HelpingMinds, should be considered for ongoing funding to ensure continuity of support, protect established trust, and avoid disruption to families who rely on these services.

3. Feedback Discussion: Program Structure, Single National Program.

HelpingMinds agrees with the program structure in principle. In addition to what is proposed:

- 3.1.1. We recommend adding an additional outcome (Outcome 3) to explicitly recognise the importance of community support beyond parents and carers, as strong families are built within strong communities, which in turn foster healthy and resilient children.
- 3.1.2. We recommend that Outcome 1 explicitly recognises diverse family structures, including kinship care and broader networks of support. This should encompass not only parents and carers but also extended family members who play a vital role in caring for and supporting children.
- 3.1.3. We recommend clarifying the term 'healthy' to ensure it encompasses mental health and social-emotional wellbeing, not just biomedical or nutritional health. Without this distinction, there is a risk that the focus will be interpreted narrowly, overlooking the importance of resilience, emotional regulation, and psychological wellbeing in children and families.
- 3.1.4. We recommend reconsidering the use of the term 'empowered' in relation to parents, as it implies they are currently disempowered. Language should avoid deficit-based framing and instead reflect the strengths, capabilities, and existing resilience of parents and carers. Alternative wording could emphasise *supported*, *equipped*, or *strengthened*, which acknowledges their role without diminishing it.
- 3.1.5. We recommend reframing Outcome 2 so that outcomes focus on children and young people developing the skills to respond to emerging challenges. Instead, outcomes should reflect how effectively services help children and young people build resilience, emotional regulation, and problem-solving skills to address challenges as they arise – not just in the context of becoming a resilient adult. Successfully addressing presenting issues represents a meaningful contribution to long-term wellbeing.

4. Feedback Discussion: Investment Priorities

HelpingMinds agrees in principle with the investment priorities, however, would like there to be further consideration:

- 4.1.1. We recommend further consideration of workforce capacity as an investment priority, including strategies for retention, training and professional development, addressing burnout and wellbeing, and building cross-sector collaboration. A sustainable, skilled, and supported workforce is essential to delivering integrated services that meet the diverse needs of children, young people, and families.
- 4.1.2. We recommend that equitable access to supports be prioritised, recognising barriers such as transport, waiting lists, and service availability. Services must be adequately funded to ensure children, young people, and families in regional and remote areas can access timely and appropriate support. Delivering equitable access requires additional time, resources, and investment to overcome geographic and systemic challenges.
- 4.1.3. While colocation of services can be highly beneficial in improving integration and accessibility, we recommend reconsidering its practicality in rural and remote communities. Staffing limitations, trust issues, availability of suitable buildings, and long travel distances all present significant barriers. In these contexts, alternative models that emphasise outreach, flexible service delivery, and community-based engagement may be more effective in ensuring equitable access and building trust with families.
- 4.1.4. We recommend that services be physically present in communities with already strongly established relationships, as face-to-face accessibility is essential for building trust and engagement.
- 4.1.5. We acknowledge that ACCOs are important in delivering culturally safe and community-led services. However, we have also found that not all First Nations families wish to engage with ACCOs, particularly in small communities where privacy concerns may arise. It is essential that families are offered genuine choice in how and where they access support, ensuring services are culturally capable, respectful and responsive, regardless of the provider.
- 4.1.6. We acknowledge and welcome the attention given to First Nations children and families. Multicultural (CALD) children and families, young carers, children and families living with disability, and those impacted by family and domestic violence are additionally vulnerable. Many face barriers such as language, cultural adjustment, discrimination, accessibility challenges, safety concerns, and limited access to culturally responsive or inclusive services. Equitable investment across all groups is essential to ensure inclusive, safe, and child and family centred outcomes.

5. Feedback Discussion: Working Together

We have been fortunate to work with contract managers who respected and welcomed our expertise, and their support has greatly strengthened our partnerships and outcomes. Further consideration will support us to deliver strong outcomes:

- 5.1.1. DEX currently collects numerical data such as service counts, demographics, and scores. While this provides a snapshot of activity, it fails to capture the depth of qualitative insights — for example, the trust built with families, the cultural safety of interactions, or the long-term impact of engagement. These stories are critical in metro, regional, and diverse communities, where success is often measured in relationships rather than numbers.
- 5.1.2. Reporting places a significant administrative burden on providers, particularly those working with First Nations and CALD communities. Our team members often need to support language translation to ensure families understand and provide informed consent for DEX reporting. This adds time, cost, and complexity, diverting resources away from direct service delivery.
- 5.1.3. We recommend that Activity Work Plans be updated half yearly through a consistent online portal as a working document, rather than annually with templates that constantly change. This would reduce administrative burden, provide greater stability, and allow providers to iterate based on community needs while demonstrating outcomes not only through scores but also through narrative stories of impact.
- 5.1.4. DEX should recognise data from multiple family sources and enable grouping of family members together, so outcomes can be illustrated at a family level rather than only for individuals.
- 5.1.5. We would like current reports via DEX to be easily printable, with a much more user-friendly download process. The system as it currently operates is slow and not user friendly. Simplifying access to reports would reduce administrative burden, improve efficiency, and ensure providers can quickly share information with stakeholders, schools, and communities.
- 5.1.6. As DSS has a nationwide perspective, it would be valuable to provide feedback on how providers and services are performing, and to share the trends and needs emerging across similar providers/services. This would help local organisations benchmark their work, identify gaps, and adapt service delivery in line with broader patterns, while still tailoring responses to their own community context.

6. Additional Recommendations

- 6.1.1. There is a need to ensure integration of state provided services, with clarity on the intersection between Commonwealth funding arrangements. Alignment across these systems is critical to avoid duplication, fill service gaps, and ensure families experience consistent, connected support.
- 6.1.2. Service partnership facilitation is important, as schools are increasingly placing onerous barriers on providers seeking to access students onsite. The government needs to consider this issue in the broader context of intersections between departments at both national and state levels, ensuring alignment and collaboration so that children and families can benefit from timely and coordinated support.
- 6.1.3. Services delivering child and family programs should have accreditation against the appropriate national standards. This would ensure consistent quality of service provision, safeguard best practice, and support the development of a skilled workforce capable of meeting diverse community needs.
- 6.1.4. Services need to think flexibly and innovatively about how to connect with regional and remote communities, recognising that online access is often challenging due to connectivity issues, digital literacy, and infrastructure gaps.

Online delivery is not always appropriate for working with children, as it can be difficult to ensure their safety, confidentiality, and wellbeing in a virtual environment. Alternative approaches that prioritise face-to-face engagement, culturally safe practices, and secure communication methods are essential.

7. Conclusion

HelpingMinds recognises that achieving the best outcomes for families and children requires a coordinated, sector-wide approach. We are committed to working in close partnership with the Department for Social Services and other stakeholders to ensure that future programs are responsive, sustainable, and aligned with community needs.

We welcome further opportunities to contribute through consultation, working groups, and implementation planning.