

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

Organisation

Organisation name

ReachOut Australia

Is your organisation....?

- A provider currently funded under one or more of the 5 programs in scope for this consultation

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
- Victoria
- Queensland
- Western Australia
- South Australia
- Tasmania
- Northern Territory
- Australian Capital Territory
- Western Australia

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

Prefer not to say

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

ReachOut supports the new vision for this program and commends its broad inclusivity and strengths-based framing. It is particularly important that 'all children and young people' are covered by the program's overarching vision, given

the much narrower priority areas and the diversity of young people's needs.

Children and young people in regional and remote communities face additional barriers to timely mental health care, including long travel distances, higher out-of-pocket and transport costs, and longer wait times that disrupt education, caregiving and employment. These constraints contribute to persistently poorer outcomes and deepen inequities between young people in regional/remote areas versus their counterparts in major cities (Clark et al. 2020; Shokoff et al. 2009).

Digital services can help overcome some of these access barriers by offering evidence-based psychosocial support flexibly, when and where needed. Well-designed digital services can address disparities in access and outcomes, with the potential to narrow the gap that may otherwise persist into adulthood.

References:

1. Clark, H., Coll-Seck, A. M., Banerjee, A., Peterson, S., Dalglish, S. L., Ameratunga, S., . . . Costello, A. (2020). A future for the world's children? A WHO–UNICEF–Lancet Commission. *The Lancet*, 395(10224), 605-658.
doi:10.1016/s0140-6736(19)32540-1
2. Shonkoff, J., Boyce, W., & McEwen, B. (2009). Neuroscience, molecular biology, and the childhood roots of health disparities: Building a new framework for health promotion and disease prevention. *Jama*, 301(21), 225- 229.

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.

ReachOut believes these outcomes could be strengthened to better connect to, and support, the new vision.

Outcome 1: 'Empowering parents' is an important and welcome frame for the support this program provides, however, 'young people' are missing with only children referenced in the outcome. This creates a disconnect from the vision. We also note that the raising of healthy, resilient children requires more than empowered parents and caregivers, but also communities, including schools, sports clubs, social services, etc.

Outcome 2: Similarly, the lack of reference to young people creates a disconnect. While childhood is a vital developmental stage, the current wording omits

adolescence, suggesting that childhood alone determines outcomes in adulthood, which is, of course, incorrect. This could be rectified by including young people alongside children ('Children and young people are supported ...'), by substituting 'adults' with people, or reframing to 'live healthy, resilient lives.'

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

A single program may provide more flexibility, however further detail on the streams and program design and operation is required to assess this. As an organisation that provides services that could fit under two streams, program clarity will be important to ensure that the new structure does provide flexibility rather than confusion.

For instance, it will be important to receive clear guidance that enables us to assess the 'best fit' stream, and how to structure any applications to ensure that services that partially fit other streams are recognised and credited within the single application.

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?

On the basis of the information available, we believe that ReachOut likely fits within two of the streams, though further details and criteria would be helpful.

ReachOut's content – delivered both onsite and via third-party channels (including social media platforms) – provides evidence-based digital support, tips and advice to support parents and carers appears to align strongly with Stream 1, ensuring widely available national access to trusted resources.

ReachOut's coaching service, however, appears to align with the broad definitions under both Streams 1 and 2, providing both national access to trusted advice and more direct prevention and early intervention support tailored to families' specific issues.

Communities need access to a variety of evidence-based supports in a mix of formats to ensure that diverse needs and help-seeking preferences are effectively catered to. For instance, there must be both place-based services and low-barrier-to-entry digital services that operate beyond standard business hours.

6. Do you agree that the four priorities listed on Page 4 are right areas for investment to improve outcomes for children and families?

The four priorities listed are worthy; however, an overly restrictive approach to investment decisions in the new program may lead to unintended consequences.

It will be important to balance any priority areas with the need to ensure broad access to services for the wider population.

Regarding the identified priorities, we would also note that:

- ‘Investing early’ is beneficial both early in life AND early in the onset of issues throughout life.
- Not all services can be co-located; however consideration should be given to how digital services can be more effectively integrated with both online and offline services. Including a reference to ‘accessibility’ may help ensure the benefits of digital services are more fully included.
- We strongly support efforts to improve outcomes for First Nations children, young people, families, and communities. Effective engagement with First Nations communities is vital if we are to deliver effective support services. In addition to ACCOs, consideration could also be given to the potential role of other First Nations community leadership structures, such as the Cape York Partnership model.

7. Are there any other priorities or issues you think the department should be focusing on?

The DSS evidence summary notes that “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.” Adolescence can also be a challenging time for parents, as the ways they provide support to adolescents need to adapt to the young person’s developmental stage, and parenting support designed for early childhood may not be suitable or available to parents of adolescents. This is not currently reflected in the priority areas.

There is a wide range of parenting support available across the early years, from classes to programs and books. However, as children age, this declines, with comparatively little support available throughout the teen years, a time we know can be particularly challenging for parents and carers. Parents and carers are seeking support that is both tailored and actionable. Although some organisations offer parenting resources, few specialise in this area and even fewer provide

dedicated support to parents and carers of adolescents.

In a recent landscape review, we identified a clear gap in services that specialise in supporting parents and carers of teens. While free counselling services for parents and carers do exist, these tend to respond to immediate needs rather than seek to proactively build parenting skills. Where coaching is available, it is typically at a high cost.

“Looking [for] resources for younger kids – seems to be easier. When you have a baby, you are inundated with information, you have papers up to your ears... [you] don’t have that for teens.” – Mother of 11-year-old male and 15-year-old female

"I think what you're doing is teaching me how to fish, not catching a fish for me. I need the tools to make the right choice, not the answer. All of this is responding to learning the importance of having the tools." Mother of a 16 year old Male

8. Do the proposed focus areas – like supporting families at risk of child protection involvement and young parents match the needs or priorities of your service?

The proposed focus areas do not directly align with our service focus. Our services support families to address family functioning and support parents and carers to develop skills/knowledge and parenting capacity to address the needs of their young people using safe and developmentally appropriate parenting approaches.

While there may be current service users from families at risk of child protection involvement, our service aims to provide support earlier in family challenges.

9. Are there other groups in your community, or different approaches, that you think the department should consider to better support family wellbeing?

ReachOut believes the Department could build upon, and enhance the effectiveness of, its approach by more explicitly ensuring older children and young people are included in the program priorities. While noting the reference to the importance of support during middle childhood and adolescence in the evidence summary, there may be a risk that by focusing primarily on ages 0 to 5, older children and young people could be under-supported and we know that social and economic disadvantage doesn’t disappear after a child turns 5.

10. What are other effective ways, beyond co-location, that you’ve seen work well to connect and coordinate services for families?

Our experience shows that it is important for a variety of service formats and modes to be available to ensure all families are able to access support according to their needs and preferences. In addition to place-based models, it is also important that this programme recognises the role and contribution of digital services.

Referrals and not knowing what support is available or how to access them are a common pain point for parents. There may be scope to harness technology, including AI, to improve referral pathways between parenting and other relevant services. With significant focus on the role of AI to improve business productivity, and potential uses within a government context, it will be important to also focus on the role of AI to improve NFP service delivery, as foreshadowed under the 'Spread the benefits' goal in the Government's National AI Plan.

In our consultations and discussions with First Nations service users, shame and cultural safety often come up as barriers to access. This can be more prevalent the more remote the community is, as users might be reluctant to access in-person support with local community members working on the ground due to shame. On the other hand, First Nations people may not feel safe using a mainstream service. There are also significant disparities in access to computers and the internet in remote communities. Together, this points to the need for a mix of service offerings, including digital services co-designed with First Nations communities.

ReachOut would be interested in exploring opportunities to integrate or coordinate support for parents and carers with youth mental health services – for instance where young people are engaged with Headspace or other services, could parents be more effectively and directly connected with ReachOut's parenting support? This has the potential to more effectively wrap necessary support around young people.

11. What would you highlight in a grant application to demonstrate a service is connected to the community it serves? What should applicants be assessed on?

This is an area where the assessment of connection to community needs to be flexible enough to reflect the different types of community connection across different service delivery modes. For instance, a local playgroup's demonstration of 'connection to community' will look very different from a national digital service.

A service like ReachOut would highlight our strong commitment to co-design, which helps ensure products and services meet community needs, our content review process which engages representatives from across the country, our various

means of collecting feedback from service users and our engagement with service users across digital platforms, and via other services and organisations.

Participants should be assessed against criteria that are relevant to them and that demonstrate connection to community that is meaningful, effective and robust.

In relation to demonstrating connection to First Nations communities, for mainstream service providers, partnerships with other services and local communities is also an important demonstration of connection. It's also critical to ensure that co-design, co-creation and genuine engagement with First Nations communities underpin service delivery.

12. Beyond locational disadvantage, what other factors should the department consider to make sure funding reflects the needs of communities?

ReachOut suggests that the department also consider the particular needs of a variety of cohorts facing disadvantage or vulnerability, including but not limited to First Nations, Culturally and Linguistically Diverse, disability, populations with high rates of domestic violence, and low socio-economic status communities.

It is important to note that help-seeking preferences, culturally driven stigma, and attitudinal barriers can vary markedly between groups, and that while service tailoring has the potential to improve accessibility and acceptability, appropriate service modes and mixes will vary between groups.

ReachOut's market segmentation research shows that the most significant driver for parents and carers (average 47%) in accessing support services is cost. Being a free service is a key feature that enables ReachOut to effectively engage families from low socio-economic communities.

There is of course, often a strong correlation between low-SES status and regional disadvantage. ReachOut actively promotes services to regional families, helping ensure we engage with those who need our support most.

A key issue for those in need of support is often low awareness of the services available to them. We would encourage greater investment in promotion of services.

13. What's the best way for organisations to show in grant applications, that their service is genuinely meeting the needs of the community?

There are a variety of ways for organisations to demonstrate that their services are genuinely meeting community needs.

First and foremost, organisations should demonstrate the robustness of their service model and their overall service effectiveness with reference to the evidence base, their theory of change, outcomes frameworks and results, and the findings of program reviews or evaluations.

It is also important that the assessment of robustness and effectiveness appropriately reflects the differences between service types and modes, such as between digital and in-person services.

We would also encourage qualitative information, such as user feedback and case studies to be considered alongside quantitative outcomes data.

Organisations could also demonstrate they are genuinely meeting needs through their program of community engagement, co-design and by outlining their processes and structures to evolve and improve their service in response to user feedback, outcomes and events.

15. What else should be built into the program design to help improve outcomes for Aboriginal and Torres Strait Islander children and families?

In our discussions with First Nations communities, they've reported a lack of culturally appropriate parenting services and that, over time, funding for parenting programs has been cut, reducing access to these services.

For mainstream service providers to effectively meet this need, deep consultation and partnership with communities or with First Nations service providers is essential. Every community has different needs, particularly in remote areas.

Flexibility is required to ensure that genuine partnerships and trust can be built over time, so that a cultural lens can be applied to existing programs, and to enable effective tailoring of support to specific cultural or local community needs.

Mainstream services could also be supported within the program to partner with local communities, ACCOs or First Nations services.

Service providers also need to ensure that they work internally to improve their own cultural-safety, policies, strategies and programs to attract and retain skilled Indigenous staff to ensure that they can improve service design, delivery and

outcomes for Aboriginal and Torres Strait Islander children and families.

16. What types of data would help your organisation better understand its impact and continuously improve its services?

To understand our impact and continuously improve our services, while preserving the anonymity and accessibility that define them, the following data types are critical:

User survey data to capture user satisfaction, trust, demographic information, and outcomes experienced from using our services, including self-reported changes to mental health literacy, family relationships, parenting confidence and sense of agency.

Targeted service evaluation data through opt-in evaluations, including:

- Pre- and post-outcome measures
- Semi-structured interviews, providing qualitative evidence of service effectiveness and improvement opportunities
- Case studies to provide relatable, holistic context for our services and a rich, in-depth understanding of users' experiences.

Real-time embedded feedback (e.g., onsite helpfulness ratings) to provide immediate insight into the value of our resources.

Digital usage analytics (e.g., Google Analytics) to identify usage patterns and engagement levels, informing service improvements

17. What kinds of data or information would be most valuable for you to share, to show how your service is positively impacting children and families?

Data demonstrating we are reaching parents/carers who have high needs (e.g., accessing our services due to concern about a young person in their care) and face barriers to accessing other support (e.g., as a result of cost or availability of other services).

Data demonstrating we are creating trust and engagement with parents/carers through high-quality services that satisfy their needs, establishing the foundations for positive change.

Data demonstrating parents/carers are experiencing positive outcomes such as: increased mental health literacy, greater connection with their child/ren, better understanding of their child/ren's experiences, increased parenting confidence, and greater readiness to try something new to support their young person's mental health.

Qualitative responses that demonstrate, in users' own words, the positive impact experienced as a result of engaging with our services.

18. If your organisation currently reports in the Data Exchange (DEX), what SCORE Circumstances domain is most relevant to the service you deliver?

ReachOut currently reports under two SCORE circumstance domains - mental health, wellbeing & self-care and family functioning. We believe they are equally relevant and important.

19. What kinds of templates or guidance would help you prepare strong case studies that show the impact of your service?

We would welcome templates or guidance from the department, but again note the importance of flexibility to account for differences in service type and mode. For national digital information services, maintaining user anonymity - a core feature that reduces barriers to help-seeking - can make it challenging to follow up with service users to develop traditional case studies.

ReachOut has extensive user feedback available, and encourages the department to consider both direct user feedback, and case studies based on user experiences and outcomes.

20. What does a relational contracting approach mean to you in practice? What criteria would you like to see included in a relational contract?

ReachOut understands that a relational contracting approach would establish a new way of working with the Department focused on overall user outcomes rather than simply meeting set performance metrics. It would allow flexibility to adapt service provision throughout the contract period to enhance outcomes, or in response to evolving priorities or user needs.

This approach would foster a partnership built on trust, transparency, and shared commitment to impact, where we work collaboratively to maximise outcomes for young people and families, with honest dialogue about successes and challenges.

In establishing a relational contract, we would like to see:

- Clear scope and philosophy alignment
- Shared values: explicitly state the foundational service values (e.g., family-centred care, trauma-informed practice, confidentiality)
- Service distinction: clearly define what each service provides and, crucially, what it does not provide
- Outcomes over outputs: success measured by impact on young people and families, not just service delivery metrics
- Adaptive flexibility: ability to adjust approaches based on evidence, user feedback, and changing contexts, with funder support for innovation
- Co-created learning framework: jointly developed goals and explicit agreement that data serves learning and improvement, not just compliance
- Trust-based accountability: regular collaborative review focused on solving problems and maximising impact, with transparency about both successes and challenges.

21. What's the best way for the department to decide which organisations should be offered a relational contract?

While assessing the potential for relational contracting to enhance outcomes, we suggest that the department establish and test the model(s) with organisations with demonstrated service delivery experience and the capacity to effectively engage with the department to trial such an approach.

22. Is your organisation interested in a relational contracting approach? Why/why not?

ReachOut would be interested to explore what a relational contracting approach would look like, but would like more detail on the Department's thinking and how this would differ in practice from current arrangements.

As a national service that has worked effectively and adaptively with the department to deliver support to families for a decade, we believe that we have the experience and trusted relationship to explore this approach.

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

ReachOut's responses have been informed by our expert parenting coaches, and our Research and Impact, Clinical Governance, Social and Emotional Wellbeing, Service, Service Design and Marketing teams.

