

Safe and Supported Second Action Plan Targeted Consultation

30 September 2026

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**Barnardos
Australia**

Safe & Supported Second Action Plan

Acknowledgement

Barnardos Australia acknowledges that this submission is made on lands that were never ceded. We recognise Aboriginal and Torres Strait Islander peoples as the sovereign peoples of this continent and acknowledge the enduring and intentional impacts of colonial practices, including the violence inflicted on Aboriginal and Torres Strait Islander children, women, families and communities. We honour Aboriginal and Torres Strait Islander resistance and leadership and affirm the right of Aboriginal and Torres Strait Islander people to lead self-determined solutions to end violence and create safety.

Barnardos Australia (Barnardos) has written this submission in response to the Department of Social Services (DSS) call for targeted written feedback to support development of the two Safe and Supported Second Action Plans:

1. National Second Action Plan
2. Aboriginal and Torres Strait Islander Second Action Plan.

Barnardos welcomes the opportunity to contribute to this important consultation process.

Barnardos has been providing early intervention, family preservation and out-of-home care services to children and families in NSW and the ACT for more than a hundred years. We bring our collective experience and expertise to this submission, grounded in strong determination about the importance of the work. Done well, early intervention, family preservation and child protection service delivery can mean the difference of safety, love and belonging for children.

Our submission is written with deep belief in the importance of a united, well-funded, skilled sector, and abiding hope for the children who rely on it.

Our submission responds in high level form to the six questions set out in the DSS discussion paper: *Identifying priorities for the Safe and Supported Second Action Plans*, as below:

1. **Supporting children, young people and families early:** What would make the biggest difference in helping children, young people and families get the right support early, before concerns escalate?
2. **Services and system coordination:** How can child and family services work better together with health, education, disability, housing, justice and family violence services to support children, young people and families?
3. **Supporting Aboriginal and Torres Strait Islander children and families:** What actions would best support Aboriginal and Torres Strait Islander children and families to stay safe, thrive and remain connected to family, community, culture and Country?
4. **Workforce capability and cultural safety:** What is needed to strengthen the child and family workforce so children, young people and families receive safe, high-quality and culturally responsive support?

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5. **Children and young people's perspective and participation:** Children and young people have told us they want connected services that are designed for them and recognise them as individuals with their own experiences, views and support needs. What guidance, resources, practice tools or other supports would help organisations better implement approaches that strengthen children and young people's safety, wellbeing, voice and participation?
6. **Accountability, data and measuring progress:** What would help governments, services and communities understand whether the Second Action Plans are improving outcomes for children, young people and families?

Supporting children, young people and families

1. What would make the biggest difference in helping children, young people and families get the right support early, before concerns escalate?

a. Sufficient and dedicated funding for early intervention:

- Stronger investment in support that is early, easy to access, inclusive, skilled, evidence-informed, non-stigmatising and welcoming is critical and would make the biggest difference for children and families.
- Early intervention funding must be protected. Many early intervention services are now working with higher risk and greater complexity because other service gaps have widened.
- The economic argument for quality early intervention speaks for itself. An excellent example is the report prepared by Social Ventures Australia for Berry Street¹. It found that a national investment of \$150 million annually over a 10-year period into early intervention programs would result in \$1.6 billion in cumulative net savings to the child protection system. This equates to saving \$2 for every \$1 invested while preventing 1,200 children from being removed from their families and entering the care system each year.
- Another example of the economic benefit of early intervention is demonstrated by the Front Project 2 which estimated that the cost of responding too late to problems affecting children and young people is \$22.3 billion each year. Statutory child protection accounted for \$10.2 billion of this cost.
- Families should not have to reach crisis point, meet a high-risk threshold or understand a complicated service system before they can get help.

¹ Social Ventures Australia & Berry Street. (2019). *The economic case for early intervention in the child protection and out-of-home care system in Victoria*. <https://www.berrystreet.org.au/uploads/main/Files/SVA-ResearchPaper-TheEconomicCaseForEarlyIntervention-2019.pdf>

² The Front Project. (2024). *The cost of late intervention in Australia*. https://www.thefrontproject.org.au/images/FINAL_4%20SEPT_COLI%20-2024-report-e-version-FINAL.pdf

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Example: Barnardos is currently working toward the reunification of two children in our foster care program to the care of their mother. The children were removed because of their father's use of violence towards their mother. The first reports about the safety of the children were made as 'pre-natal reports' when the mother was early in her pregnancy with her first child. Her experiences were consistent with evidence³ that men's use of violence towards women frequently increases during pregnancy. Despite reports to the statutory child protection system about the children's safety, the family did not receive the support they needed until the mother was seriously injured and the children were removed. The older child is now struggling with significant challenges due to the trauma he has suffered. This family needed intervention in response to the first reports, including valuing the mother's expertise in safety planning, ensuring the father took responsibility through criminal and therapeutic avenues, and providing quality perinatal services.

b. Investing in communities

- Strong communities are essential to child safety and wellbeing. Investment in community capacity, connection and leadership creates protective environments where children and families can thrive.
- Services alone cannot keep children safe. Children's outcomes are shaped by their everyday experiences in families, schools, cultural groups, sporting clubs and neighbourhoods. Community development should be recognised as a core element of prevention and early intervention.
- Connected communities enable earlier support. Strong local networks reduce isolation, strengthen informal supports, and help identify and respond to emerging risks before they escalate.
- Investment in Aboriginal and culturally diverse communities is essential. Strong identity, connection and community leadership are key protective factors that support children's safety, wellbeing, belonging and resilience.
- Place-based and community-led approaches should be prioritised. Flexible investment enables communities to design solutions that reflect local strengths, needs and cultural contexts.

c. Attending to the drivers of oppression

- Investment must address the drivers of marginalisation and structural disadvantage. Poverty, racism, gender inequality, ableism and discrimination increase children and young people's experiences of adversity and chronic stress.
- Children's safety and wellbeing are influenced by broader social and economic conditions. Investment in reducing poverty, discrimination and social exclusion will strengthen protective factors and reduce developmental vulnerability.

³ Australian Institute of Family Services 2015

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d. Accessibility and inclusivity

- Support should be available in places families already know and feel comfortable to seek support. This includes schools, early childhood services, playgroups, community centres, universal health services and Child and Family Hubs.
- Regional and remote families face added barriers, including long travel distances, limited public transport, fewer specialists and long waitlists. Funding should support local outreach, travel and vehicles, while telehealth should add to, not replace, face-to-face support for families who are marginalised.
- More external welfare support should be embedded in schools. Outreach models, including Streetwork program that meets young people 'on their turf, on their terms', should also be funded.
- Workers need flexible eligibility rules, enough time to build trust and practical brokerage funding for assessments, therapy, transport, equipment and urgent material help. This approach is supported by strong Australian evidence (The Front Project, 2024).
- Earlier specialist support is especially important during pregnancy and the early years. This includes support for families experiencing violence or substance use, timely help while families wait for the National Disability Insurance Scheme (NDIS) or Thriving Kids, and affordable assessments for developmental differences such as ADHD and autism.
- Safe housing is essential. Families experiencing homelessness or escaping a man using violence need clear advocacy pathways and practical help to find safe, suitable housing.

e. Whole of family approaches

- Families often face several pressures at the same time, such as domestic and family violence and its related impacts such as mental health concerns, substance use, financial stress, unstable housing, disability, or difficulties with school and work. Services should respond to the whole family, with one trusted service coordinating connections around the family, assessments of strength and need, referrals, practical help and care planning so families do not have to repeat their story.
- Families should experience one connected system, not a set of separate services. Better coordination requires shared understanding, shared spaces and shared responsibility.
- Child and Family Hubs and other one-stop locations can bring together child and family support, health, mental health, disability, housing, education, alcohol and other drug services, and domestic and family violence expertise. Families can get help in one trusted place, while services share risk, planning and responsibility.

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Example: Through its playgroups in western NSW, Barnardos frequently supports children and their mothers who are victims of domestic and family violence. There are few safe options for women wanting to leave their partners, so these playgroups provide a safe space to connect with others and learn about available support services. Skilled practitioners who can work with a 'whole family' approach are essential. Rather than referring individual family members to multiple services that they often need to navigate themselves, this whole family approach enables children and families to access coordinated support. Ideally, it would be coordinated by a key worker who ensures services are accessible, integrated and holistic.

Services and system coordination

2. How can child and family services work better together with health, education, disability, housing, justice and family violence services?

- Funding is needed for agencies to work across sectors and jurisdictions. Regular forums involving community organisations, government, schools, health, housing and other services can identify emerging concerns, coordinate support and develop shared safety plans. Existing forums, including SafeStart and Safety Action Meetings, should consistently include relevant community organisations. Interagency collaboration and sector relationship management should be resourced.
- Schools and early childhood services are critical partners because educators often notice changes early. They need practical support to understand trauma, family violence and other vulnerabilities, engage safely with families and take part in coordinated responses.
- Generalist child and family services should be recognised as trusted connectors to specialist systems. Housing specialists and clear advocacy pathways must be part of the network, particularly for families experiencing violence or homelessness.
- Coordination takes time. Network meetings, information sharing, joint planning, case coordination and relationship building should be funded as core work, rather than understood as extra tasks.
- In regional and remote communities, where services are fewer and spread over large areas, co-location and strong local partnerships are especially important. Local services understand their communities and should have flexibility to adapt coordination models rather than having a city-based model imposed on them.

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Supporting Aboriginal and Torres Strait Islander children and families

3. What actions would best support Aboriginal and Torres Strait Islander children and families to stay safe, thrive and remain connected to family, community, culture and Country?

- Aboriginal Community Controlled Organisations (ACCOs) must be recognised and funded as leaders, experts and holders of cultural knowledge. Partnerships should be genuine, with the authority and leadership of ACCOs respected.
- Funding should be more flexible. ACCOs and Aboriginal and Torres Strait Islander (ATSI) programs need room to respond to family and community priorities as they change. Communities must be trusted to define what safety, wellbeing and positive outcomes mean for their local families. Funding should support local projects and local needs rather than requiring every community to use the same prescribed model, as well as avoid assumptions that approaches designed in metropolitan areas will work everywhere.
- Due to the ongoing impacts of colonisation, ATSI people are overrepresented as both victim-survivors and perpetrators of domestic and family violence⁴. A 2011 study⁵ estimated that around 90% of violence against ATSI women and most cases of sexual abuse of ATSI children are undisclosed. Urgent attention must be paid to the range of barriers to ATSI women and children disclosing their experiences of violence and abuse, including fear of child removal; discriminatory practices and lack of cultural competency across the support sector; fear of reprisal by the perpetrator or 'payback'; fear of losing social or community-controlled housing; fear of not being believed; and a lack of access to transportation and/or communication channels, especially for those living in rural and remote areas.
- Longer-term investment is needed in ACCOs and other culturally safe local services, particularly in regional and remote communities. Stable funding helps organisations retain staff, build trust and keep children connected to family, community, culture and Country.

Example: In Western NSW, Barnardos has been supporting an Aboriginal grandmother who has the care of her grandchildren while their mother is in prison for offences relating to chronic substance misuse. The children have a variety of needs, both educational and therapeutic, yet access to education support and therapy is limited. The children's mother has suffered from undiagnosed depression, because of significant trauma, for many years. Her substance abuse should have been recognised as a coping response to violence, which had also contributed to severe and debilitating depression, and culturally appropriate addiction treatment should have been available. Had she had such services in her community earlier, with access to non-stigmatising, empowering support, the trajectory to criminal charges, prison and child removal could have been avoided.

⁴ Cripps 2023

⁵ Willis 2011

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Workforce capability and cultural safety

4. What is needed to strengthen the child and family workforce so children, young people and families receive safe, high-quality and culturally responsive support?

- A strong workforce is not only skilled. It is supported, valued, rewarded, paid well, and able to stay long enough to make a difference.
- The workforce is the sector's greatest asset, but many workers are stretched and under-resourced. Funding must reflect the real cost of employing skilled staff, providing supervision and training, and allowing workers enough time to build relationships with families.
- The 'Pay What It Takes' framework⁶ argues that NGOs, like Barnardos, cannot achieve real, lasting social impact unless government contracts fund the full, true cost to run operations rather than just direct program costs.
- Practitioners often join NGOs, like Barnardos, because their values align with the vision and purpose of the agency. Sadly, organisational instability and temporary contracts frequently force practitioners out because of the need for basic financial security.
- Regional and remote services face particular difficulty recruiting and retaining social workers, psychologists, counsellors, allied health workers and other specialists. Existing staff often carry greater complexity because there is nowhere else to refer families. Funding should cover workforce incentives, travel, outreach, training access and the higher cost of delivering services across large areas.
- Important approaches to ensuring skill, quality and longevity of the workforce include:
 - Embedding domestic and family violence specialists, disability navigators, cultural advisers, mental health and alcohol and other drug practitioners, and perinatal workers in universal services and Child and Family Hubs.
 - Providing ongoing, practice-based training in trauma-informed care, cultural safety, child participation, family violence risk assessment and Child Safe practice.
 - Ensuring safe workloads, reflective practice, peer supervision and strong management support.
 - Creating clear professional development pathways that recognise lived experience and cultural expertise as valid knowledge; and offering longer-term funding so services can retain skilled staff and give families continuity with the same worker wherever possible.

⁶ Centre for Social Impact 2022

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Children and young people's perspective and participation

5. What would help organisations strengthen children and young people's safety, wellbeing, voice and participation?

- Children and young people are experts in their own lives. Their right to participation must be built into everyday practice and organisational culture.
- Children must be recognised as victim survivors in their own right.
- Workers need simple, child-friendly tools such as conversation cards, storytelling, drawing, art and other age-appropriate ways for children to communicate safely. Tools should be adaptable for different ages, disabilities, developmental needs, communication styles and cultural backgrounds.
- Practical training should help workers engage children in ordinary interactions, sometimes called 'accidental consultation'. Workers also need guidance on recognising when behaviour may be communicating something a child cannot or does not want to say directly.
- Safe, central places could help gather children and young people's views for the wider sector. This would reduce repeated consultation with the same young people and the frustration that comes when they share their views but see no action.
- Organisations must be ready to respond. They should show children and young people how their views changed decisions, service design, safety planning or outcomes. Children should be able to say: 'They listened to me, they believed me, and what I said made a difference'.
- Child and Family Hubs could connect children earlier with psychologists, occupational therapists, speech pathologists and other specialists in a familiar setting.
- Children and young people in regional and remote areas must be included in service design and policy decisions. Digital options can broaden participation, but organisations also need local, culturally safe and face-to-face ways to hear from children who have limited internet access, transport or service choice.

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Accountability, data and measuring progress

6. What would help governments, services and communities understand whether the Second Action Plans are improving outcomes?

- We need to measure what matters to children and families, not only what is easiest to count. Success may mean a child feels safe enough to attend school, a parent feels able to ask for help, a family remains safely together, a young parent reconnects with education or work, or support arrives before a crisis.
- Evaluation should combine data with the lived experience of children, young people, families and frontline workers. Measures should cover safety, wellbeing, stability, connection, participation, family functioning, housing, school engagement and reduced entry into child protection. They should also capture longer-term effects across health, education, welfare and justice.
- Australian Institute of Criminology research⁷ found that early support for families can reduce later reliance on welfare, pressure on criminal and youth justice systems, and medical, psychological and institutional costs. The Australian Child Maltreatment Study⁸ also shows a strong link between childhood maltreatment and serious mental health problems in young people, reinforcing the need to further measure whether early support prevents harm and improves long-term wellbeing.
- Outcomes should be tracked over time. Trust, safety and stronger parenting do not always fit within a short program or funding cycle. Evaluation should also examine what happens to families that cannot access services, not only those that successfully enter and complete a program.
- Children and families should be asked whether they felt heard and safe, whether support was useful and timely, and whether life improved. Communities should help define success, particularly Aboriginal and culturally and linguistically diverse communities.
- Results should be broken down by place, so regional and remote experiences are not hidden in statewide or national figures.
- Measures should show whether families face long waits, travel barriers, gaps in specialist services or unequal access compared with metropolitan areas.
- Evaluation should lead to learning and improvement, with clear information about what works, where families are falling through gaps and what needs to change. Governments should be transparent about progress across service systems and jurisdictions.
- Data collection must be properly funded and simple enough that frontline workers can focus on relationships and support rather than excessive administration. The clearest test of success is whether families can say, 'I was heard. I knew where to go for help. I got the right support when I needed it, and things are safer and better for my children'.

⁷ Australian Institute of Criminology, 2006

⁸ Haslam et al., 2023