



Community & Family Support Program

AbSec Position Paper

July 2025



Acknowledgement of Country

AbSec acknowledge the Gadigal and Wangal People of the Eora Nation, the land on which we work, and pay respect to Elders past, present and emerging. We acknowledge the Elders, leaders and advocates within our sector and pay our respects to them as knowledge holders within this space and every space.

AbSec also acknowledges the Stolen Generations who never came home and the ongoing impact of government policy and practice on Aboriginal and Torres Strait Islander children, young people and families.

Aboriginal and Torres Strait Islander readers are warned that the following study report may contain images of deceased persons.



AbSec NSW

AbSec is the peak organisation advocating for the rights, safety, and wellbeing of Aboriginal and Torres Strait Islander children, young people, families, and communities in New South Wales.

As an Aboriginal-led organisation, we champion self-determination and work towards a child and family system that is culturally safe, community-driven, and responsive to the needs of Aboriginal and Torres Strait Islander peoples.

AbSec leads policy reform, strengthens the capacity of Aboriginal Community-Controlled Organisations (ACCOs), and ensures that Aboriginal children and young people remain connected to family, community, and culture. We are a key member of the NSW Coalition of Aboriginal Peak Organisations (NSW CAPO) and the primary organisation responsible for Target 12 under Closing the Gap.

Through advocacy, research, and sector leadership, AbSec works to address the disproportionate representation of Aboriginal children in out-of-home care and promote holistic, community-led approaches to child and family wellbeing. Our commitment is to ensuring that Aboriginal children and young people grow up strong in culture, identity, and connection.

Our vision is that all Aboriginal children and young people are looked after in safe, thriving Aboriginal families and communities, raised strong in spirit and identity, with every opportunity for lifelong wellbeing and connection to culture, and surrounded by holistic supports.

In working towards this vision, we are guided by these principles:

- Acknowledging and respecting the diversity and knowledge of Aboriginal communities.
- Acting with professionalism and integrity in striving for quality, culturally responsive services and supports for Aboriginal families and communities.
- Underpinning the rights of Aboriginal people to develop our own processes and systems for our communities, particularly in meeting the needs of our children, young people, families and carers.
- Being holistic, integrated and solutions-focused through Aboriginal control in delivering outcomes for Aboriginal children, young people, families and communities.
- Committing to a future that empowers Aboriginal families and communities, representing our communities, and the agencies there to serve them, with transparency and drive.

Executive summary

This Position Paper represents the voices of Aboriginal Community-Controlled Organisations (ACCOs) delivering Targeted Early Intervention (TEI) and Family Connect and Support (FCS) services across New South Wales (NSW). It is directed to the NSW Department of Communities and Justice (DCJ) and other decision-makers involved in early intervention reform.

With the upcoming launch of the Community and Family Support (CFS) program in 2026, the NSW Government has a critical opportunity to meet its 30 percent Aboriginal commissioning target. To achieve this goal, DCJ must genuinely commit to funding and supporting Aboriginal-led, and community-driven service delivery.

Based on consultation with ACCOs, sector leaders and existing evidence, this paper shows that ACCOs deliver the strongest outcomes for Aboriginal families. Yet under current funding arrangements, structural barriers continue to limit their full participation and impact. The paper identifies key recommendations for reform.



“We’re not asking for special treatment—we’re asking for a system that sees us, hears us, and trusts us.”

Recommendations

1 Commissioning reform

Shift to community-led, partnership-based commissioning that embeds Aboriginal decision-making and supports localised, trust-based relationships.

2 Funding and investment

Increase and secure long-term, flexible funding for ACCOs, including support for brokerage, transport, and specialist services.

3 Outcomes and accountability

Redesign reporting systems with ACCOs to reflect culturally grounded outcomes, reduce administrative burden, and recognise informal supports.

4 Aboriginal sector growth

Develop and fund a strategic plan to build the capacity of ACCOs, supporting both established and emerging organisations to deliver early intervention.

5 Program and system design

Redesign service types, eligibility and program alignment to reflect Aboriginal ways of working and support seamless, holistic service delivery.

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Thank you to our contributors

We acknowledge and thank the stakeholders and Aboriginal Community-Controlled Organisations (ACCOs) who generously shared their time, insights and experiences. Their contributions have been instrumental in shaping the recommendations in this report.

- Aunty Deborah Swan, Founding Member, Grandmothers Against Removals NSW.
- Petrice Manton, CEO, Muloobinba.
- Alira Tufui, Director of Sector Innovation, AbSec.
- Muloobinba, Newcastle and Lake Macquarie.
- South Coast Aboriginal Medical Service, Illawarra-Shoalhaven (Nowra).
- Orange Aboriginal Medical Service, Orange.
- Ngunya Jarjum, Far North Coast.

Finally, we would like to thank the participants of Nama Jalu's workshop held at the AbSec Quarterly Sector Forum (27 May 2025) who provided invaluable insight to this position paper.



Glossary of acronyms

AbSec	Aboriginal Child, Family and Community Care State Secretariat
ACCO	Aboriginal Community-Controlled Organisation
ACCHO	Aboriginal Community-Controlled Health Organisation
ATSICPP	Aboriginal and Torres Strait Islander Child Placement Principle
CAPO	NSW Coalition of Aboriginal Peak Organisations
CFS	Community and Family Support
CTG	Closing the Gap
DCJ	NSW Department of Communities and Justice
DEX	Data Exchange
FaCS	Family and Community Services
FCS	Family Connect and Support
IMR	Improving Multidisciplinary Responses
NSW	New South Wales
OAMS	Orange Aboriginal Medical Service
OOHC	Out-of-Home Care
SEWB	Social and emotional wellbeing
SCMSAC	South Coast Medical Service Aboriginal Corporation
TEI	Targeted Early Intervention

Disclaimers

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Introduction

This Position Paper (the Paper) has been prepared by AbSec—the NSW Child, Family and Community Peak Aboriginal Corporation—in partnership with Nama Jalu Consulting to represent the voices of Aboriginal Community-Controlled Organisations (ACCOs) delivering Targeted Early Intervention (TEI) and Family Connect and Support (FCS) services across New South Wales (NSW). It is intended to inform the approach of the NSW Department of Communities and Justice (DCJ) and other relevant decision-makers in the recommissioning and reform of early support services for Aboriginal children and families.

The NSW Government has committed to increasing the share of commissioned services delivered by ACCOs to 30 percent. They first articulated a target of 30 percent of TEI funding for ACCOs in their Aboriginal Outcomes Strategy 2017–2021 stating “where funding becomes available, DCJ is re-redirecting and re-prioritising funds to deliver on its commitment to invest 30 percent of early intervention programs funding into Aboriginal Community Controlled Organisations (FACS, 2017)”.

As TEI and FCS are merged in the new Community and Family Support (CFS) program, which will commence in 2026, this is a critical opportunity to ensure that Aboriginal-led services are properly resourced, empowered, and supported to lead early intervention efforts across the state.

Drawing on recent consultation with ACCOs and key stakeholders within our sector, this paper highlights the strengths of Aboriginal-led service delivery, identifies the structural barriers to participation and success under current commissioning arrangements, and sets out recommendations for reform to improve early intervention supports for Aboriginal people and families.

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“There’s a lot of us ready to step up, but we need backing. Not just money, but time, relationships, support.”

Background and context

The Targeted Early Intervention (TEI) and Family Connect and Support (FCS) services are core pillars of the early support system funded by the DCJ in NSW. TEI focuses on building protective factors and strengthening families to prevent escalation into the child protection system, while FCS provides a soft entry point for families with more complex or acute needs through facilitated referral pathways. Both services are being brought together under the Community and Family Support program, scheduled to commence in 2026.

This integration is part of a broader reform agenda intended by DCJ to create more coordinated, effective and culturally responsive support for families. However, there are significant concerns that without structural reform, the CFS program risks entrenching the same limitations faced by ACCOs under TEI and FCS.

The evidence base on what works for Aboriginal people and families

In support of what Aboriginal communities have been saying for many years, a growing body of evidence confirms that ACCO-led service delivery achieves better outcomes for Aboriginal families by embedding culture, trust, and self-determination at the core of practice. Key findings include:

The *TEI Program Evaluation* (2022) found that Aboriginal families prefer ACCO-delivered services due to cultural safety, flexible engagement, and the use of trusted community members in service delivery roles. ACCOs were also recognised for supporting holistic, wrap-around models that go beyond the restrictions of specific TEI service types.

The *FCS Program Evaluation* (2023) found that Aboriginal families often face mistrust and fear when engaging with mainstream services. ACCOs were identified as critical providers of culturally safe alternatives.

The *Aboriginal Evidence Scan* (2021) commissioned by DCJ acknowledged the importance of Aboriginal leadership, long-term relational approaches, and wrap-around family supports in improving outcomes. The scan also highlighted that data collection systems often fail to capture these culturally embedded forms of support, making it harder for ACCOs to demonstrate their impact in mainstream reporting systems.

The *Family Matters Report* (2023) and the Family is Culture (2019) review repeatedly stressed the need to shift investment upstream into early intervention, particularly through Aboriginal-led, community-based services that prevent children from entering out-of-home care (OOHC). This, however, is yet to be realised.

Extensive reviews and evaluations have already shown that ACCOs are delivering the most effective and culturally responsive early intervention supports for their communities. Despite this, ACCOs remain significantly under resourced and under supported to continue and grow their valuable work.

NSW Government policy commitments are not being met

The NSW Government has made strong commitments to Aboriginal-led reform. This includes:

- A target to commission 30 percent of all relevant early intervention programs through ACCOs.
- The embedding of Aboriginal Case Management Policy (ACMP) principles.
- Commitments to Aboriginal data sovereignty, community governance, and self-determination through Closing the Gap implementation plans.

However, ACCOs report that these commitments have not yet translated into real change. Commissioning processes inaccessible for many and not aligned with Aboriginal ways of knowing, being and doing. The core data system used by DCJ, the Data Exchange (DEX), is failing to measure what matters to community. Investment also continues to be focused on services at the end of the support spectrum, such as OOHC, with insufficient investment into early intervention despite the rising rates of Aboriginal children in OOHC.

Aboriginal children represent 45 percent of the NSW OOHC population, despite being only 8 percent of the total child population as at 30 June 2024. Yet, funding is skewed towards statutory systems rather than prevention and early support. ACCOs have repeatedly called for the redirection of investment upstream to support the earliest forms of support to keep families together and children out of statutory and justice systems. It is vital that this investment occurs in ACCOs. However, the State Budget 2025 shows that the Minns Government is primarily focused on investment in OOHC and not effective, outcomes based early intervention. AbSec strongly advocates for redirecting these funds to what will keep Aboriginal children safe and together with their families, strong in culture and connected to Country and community.

Our positions

Position one: ACCOs are best placed to deliver early intervention supports for Aboriginal and Torres Strait Islander people and families.

Aboriginal Community-Controlled Organisations (ACCOs) have unique strengths that position them as best placed to deliver early intervention supports for Aboriginal people and families. These strengths include connection to the communities they work in, the embedding of culture at all levels of service design and delivery and a focus on relationship-based practice grounded in trust. Each of these elements are deeply woven into each ACCOs way of working, occurring naturally and existing as intrinsic aspects of services provided by Aboriginal people, for Aboriginal people. Consultation for this Paper reinforced the existing evidence base which clearly advocates for ACCOs to provide the most appropriate and effective early intervention supports for Aboriginal people and families.

Connection to community

ACCOs, being controlled and operated by Aboriginal people, have an inherent connection to the communities in which they operate. ACCOs consulted spoke of their staff's cultural, social and familial connection to community and awareness of local challenges and strengths at individual and community levels. Connection to community provides many advantages in practice which reduce barriers to accessing early intervention supports. These include:

- An understanding of an individual's history and needs prior to their engagement with the service.
- Clients not having to repeat their story—reducing the risk of re-traumatisation, and making for a significantly better experience.
- An ability to build relationships and trust between the service and community, even before any need for specific support or intervention arises.

Each of these factors contribute to community members being more likely to engage with a service when they do find themselves in need of support.



“We hold trust in the community—families come to us because we’re part of them.”

Embedded culture

The presence of culture in ACCOs extends far beyond integrating cultural activities in service delivery. ACCOs emphasised that culture is embedded in all aspects of their work, with Aboriginal ways of knowing, being and doing shaping everything they do. Specific illustrations of some of the ways culture is embedded in services are covered in greater depth in other parts of the Paper. These include: relationship-based practice, whole of family approaches and embedding self-determination in service design.

Relationship-based practice

Relationship building is at the heart of how ACCOs work with community. Relationship building is fundamental to Aboriginal-led and culturally grounded service delivery. ACCO staff value and nurture relationships with the people that access their service, viewing their relationship as 'person-to-person' rather than 'service-to-client'. Through our research and consultation, relationship-based practice is key to achieving positive outcomes for Aboriginal people and families. However, building relationships often requires a longer duration than TEI contracts allow for.

Specific benefits of relationship-based practice raised throughout the consultations include:

- Clients feeling safe and comfortable when accessing supports.
- Clients remaining engaged with services and feeling comfortable to re-engage with a service when needed.
- In some cases, enabling Aboriginal staff to function as role models for their clients.
- Enabling the building of trust between the service and clients.



"It's not a job—it's a responsibility we carry with and for our people."

Trust

This historic and ongoing trauma inflicted on Aboriginal families and communities by government policies that authorise the forcible removal of children from their families and Countries has severe and intergenerational effects. In consideration of this, it is essential that services build a deep sense of trust for Aboriginal people and their families in the delivery of early intervention services. ACCOs that are already connected to their communities, and embed culture and value relationship-based practice are well placed to build the trust necessary to achieve the best outcomes for Aboriginal children and families. Similarly, as above, ACCOs stressed that this trust is built over extended periods of time, which often extend beyond the timeframes of TEI funding.

"It takes time. Blackfellas don't want to share their story straight away...They want to test the waters to see whether or not you're going to do what you say you're going to do...Building that trust takes time."

Flexible and responsive to individual and local strengths

ACCO delivered TEI embeds self-determination at a client level and builds on the unique strengths of each family. In our consultations, ACCO representatives emphasised that each Aboriginal family is different and knows what works best for them. It is therefore crucial that ACCOs can operate flexibly and be responsive to individual client and community needs in order to provide the most appropriate support and achieve the best possible outcomes for Aboriginal families.

"Every family's journey is different. We don't just tick a box — we work with them as long as it takes."

One ACCO shared a powerful example of how their art group's success stemmed from its flexible and organic evolution over time, shaped by the group's own strengths and interests. This self-determined approach, supported within a TEI funding agreement, led to:

- Increased engagement,
- Improved social and emotional wellbeing,
- Skill development,
- A sense of pride, belonging and ownership, and
- Built client capacity to commercialise their skills.

While current TEI and FCS service requirements allow for some flexibility, this works best when DCJ contract managers have built strong, trust-based relationships with ACCOs and actively empower them to deliver services in culturally responsive ways. However, many ACCOs reported that they are often forced to innovate within a rigid framework. Given the clear link between flexibility and positive outcomes for Aboriginal children and families, DCJ should invest in meaningful consultation with the ACCO sector to co-design a funding and contracting model that enables greater flexibility, responsiveness, and support for local strengths and self-determination.

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“It’s about meeting people where they are at and walking beside them on their journey.”

Position two: Rigid service types do not reflect Aboriginal-led holistic approaches.

Current TEI service specifications are prescriptive, limiting and cater to mainstream service delivery—forcing ACCOs to unnaturally fit complex, culturally grounded practices into rigid service types. In some instances, ACCOs reported that their service types were selected by DCJ. The impact of this is two-fold; ACCOs are forced to report on program specification guidelines that are misaligned with their service activities and, secondly, ACCOs are forced to tailor service delivery to KPIs, rather than the needs of community. When ACCOs tailor their services to align with contract requirements, their ability to achieve outcomes for clients is impacted. ACCOs are therefore limited by the requirements of DCJ to take a truly community-led approach to service design and delivery, which is what the evidence finds works best. Furthermore, they face challenges in reporting due to the necessarily fluid and changing support needs provided to the clients, grounded in Aboriginal ways of knowing, being and doing. To address this, ACCOs recommended their early involvement in the commissioning process, embedding Aboriginal language and cultural principles into program specifications, commissioning more flexibly and tailoring services to local needs.

“You have to stretch the service types just to do what’s needed. Our culture doesn’t fit their templates.”

On this, two specific concerns were raised:

1. Current TEI guidelines do not support ACCOs to work with families in a way that reflects Aboriginal concepts of family, relationality, and kinship, which extend beyond the western concepts of family that ground DCJ frameworks.
2. ACCOs expressed a desire to support parents whose children have been removed by helping them work toward family restoration. Current funding guidelines do not allow for this type of service delivery.

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“Our mob don’t fit in neat boxes. We work with aunties, cousins, whoever the kids are safe with.”

These concerns illustrate some of the ways in which the TEI and FCS programs do not accommodate Aboriginal-led holistic approaches.

Building on these concerns, ACCOs also highlighted the structural barriers that exist across the broader service system, particularly the disconnect between TEI and other child and family programs like Family Preservation and OOHHC. ACCOs being funded to deliver services across the continuum of care has many benefits – including clients not having to repeat their story and build relationships with multiple providers.

Although bringing the TEI and FCS programs together supports this, there is scope for better alignment of the TEI with Family Preservation and OOHC. It was noted in consultations that there is too big a gap between the intensity of support able to be provided in the TEI program and the Family Preservation program. Additionally, ACCOs spoke of the need for greater flexibility to refer clients between TEI and Family Preservation programs as their needs change. The current process is rigid and requires clients to be referred into Family Preservation through DCJ, inhibiting the work of ACCOs who are best placed to assess client's needs. ACCOs call for support to expedite referral pathways to enhance outcomes for their clients.

In this context, bringing the CFS, Family Preservation and OOHC under the same commissioning team would streamline communication, ensure there are no gaps in the continuum of supports for children and families and allow for strategic commissioning decisions to be made across all programs. This could be understood as a practical step toward embedding a more integrated, flexible and culturally responsive service system that works better for Aboriginal children and families.

Position three: Contract and reporting requirements are constraining service delivery.

Contract and reporting requirements are often limiting and onerous, taking a one-size-fits-all approach grounded in Western ways of knowing, being, and doing – causing a misalignment for Aboriginal-led, culturally-grounded services. This presents a significant challenge for ACCOs funded to deliver TEI and FCS services.

High administrative burden

Many ACCOs are underfunded to deliver supports to their community, and as a result, operate with limited resources. Placing significant administrative burden on ACCOs undermines their ability to focus on achieving outcomes for Aboriginal children and families and places strain on service delivery.

In consultations, ACCOs specifically mentioned that developing and maintaining program logics is onerous. They also felt that their assistance from the department during this process was not sufficiently clear or practical.

Another specific issue raised in consultations was the difficulty of reporting on the provision of information, advice and referrals. ACCOs noted that this aspect of their work is constant, ongoing, often informal and therefore challenging to quantify in DEX.

"We spend more time reporting than working with families. It's numbers, not stories."

Contract requirements are limiting

ACCOs reported that KPIs and contract requirements are rigid and overly focused on numerical targets, which limits their ability to deliver services in ways that best meet the needs of their communities. Rather than contract requirements supporting good service delivery, ACCOs feel they are forced to shape their work around meeting KPIs. This results in services being designed to fit reporting obligations, rather than by what will achieve the best outcomes for clients. ACCOs emphasised that service delivery should inform reporting, not be dictated by it.

Reporting is not culturally appropriate

Current reporting requirements do not align with Aboriginal ways of working in early intervention service delivery. As discussed earlier, a relationship-based approach is at the heart of service delivery for ACCOs. ACCOs express discomfort around requirements to keep data about community members seeking support as it changes the status of the person seeking support from a peer to a client. Further, it was felt that this relational shift alters the balance of power from the individual, who has ownership over the space and their journey, to them being a data point.

ACCOs also noted that qualitative data, such as narratives and good news stories, more meaningfully capture outcomes achieved by Aboriginal families. However, they expressed concern that adding qualitative reporting requirements would increase the administrative burden.



“DEX doesn’t tell you anything about whether the family is stronger, safer, or more connected.”

Tailoring reporting to Aboriginal communities

Contract requirements, such as KPIs, need to be applied with greater flexibility or be locally tailored to better align with the realities of working with Aboriginal communities. This was noted especially for services operating in small or remote communities, who often must travel long distances to provide their service(s). They experienced challenges with reporting.

Long-term, trusting and relationship-based approaches that ACCOs take to early intervention present difficulties with reporting, as the requirements are more applicable to short-term crisis interventions and mainstream models of care.

Position four: Commissioning of early intervention services should shift to a place-based and community-led approach.

Commissioning arrangements are a key enabler to effective Aboriginal-led service delivery. Stakeholders consistently described how meaningful outcomes are achieved when commissioning approaches and contract management genuinely listen to community and are tailored to local contexts. However, current commissioning remains largely top-down and centralised, limiting flexibility and involvement of Aboriginal communities to shape services that work for them.

Competitive tendering is not working

Key concerns raised by many ACCOs was that competitive tendering processes include:

- Not aligned with the needs and approaches of culturally grounded services,
- Not responsive to the principles of self-determination, and,
- Hinder sector development.

For instance, several ACCOs consider that the adversarial process was dividing their communities and discouraging the collaboration necessary to effectively support local people and families. Smaller and emerging ACCOs are particularly affected, as they are less likely to have the resources or experience to make strong cases to DCJ for funding. Overarchingly, ACCOs called for a shift to commissioning that prioritises partnership, capacity building, and collective impact over competition.

A community-led approach drives better outcomes

While there have been policy commitments to Aboriginal-led commissioning, many ACCOs continue to feel excluded from meaningful decision-making and do not feel listened to. Contracts are often designed without local input and there is a strong view that the service specifications are insufficiently aligned with communities' needs.

"If they'd sat down with us at the start, we could have told them what the community needed — instead we're working backwards to fit into a program."

ACCOs reported that services are most successful when they are designed with the community from the beginning. Aboriginal communities understand their own needs, relationships and strengths — they are best placed to design and deliver services that reflect those realities. Many ACCOs shared how their service models had evolved through listening to families, adapting to emerging issues, and working with local Elders and other leaders. Enabling this, however, requires a more flexible approach from commissioners.

Trust-based commissioning works

Commissioning can work well when it is grounded in strong local relationships between ACCOs and DCJ representatives. Several ACCOs describe positive relationships with local DCJ contract managers who took the time to build trust, understand the local context, and offer flexibility in contracting and reporting. In these cases, ACCOs were able to develop and deliver services that were more effective in responding to community needs, and therefore better supported to achieve the goals of TEI and FCS funding. Unfortunately, these examples appear to be exceptions. Through systemic reform, this locally based, relationship-centred practice can be embedded across DCJ funding programs.

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“Good commissioning happens when DCJ listens, not when they put out a template.”

Stakeholders recommended that DCJ should focus on commissioning led by local DCJ offices who can walk alongside them and co-design services for success. This would involve taking time to understand local needs, involving Aboriginal communities at every stage in decision making, co-designing service models and outcomes with ACCOs and investing time in relationship-based commissioning over transactional contracts.

Reforming commissioning will require structural change to design service delivery systems that are more trusted and set up for success.

Position five: ACCOs are delivering beyond service specifications, but funding is not sufficient or secure.

ACCOs frequently deliver beyond service specifications to meet the needs of their communities, reporting that working in a cultural way necessitates flexibility and a responsiveness to the needs of the individual client and the broader community. Being flexible and responsive supports a culturally and outcomes driven, relationship-based, community-led approach. TEI funding alone is, broadly speaking, insufficient to meet community need. As a result, many ACCOs have used TEI funding to fill gaps left by other funding streams, build on existing initiatives, or deliver supports in creative and low-cost ways to deliver a holistic service and maximise impact and outcomes.

“We do way more than the contract — because families need it, and no one else will.”

All ACCOs expressed a specific need for additional brokerage to support transport, specialist supports, food, fuel, transport, clothing and school supplies—among other necessities—to maximise the impact of their TEI program. The needs of each ACCO depend on the needs of the community. For example, more rural ACCOs have a more pressing need for additional funding to support transportation costs. ACCOs themselves are best placed to understand the unique needs of their local communities and funding should be flexible enough to accommodate this.

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“Sometimes staff are using their own money for fuel. That’s how committed they are—but it’s not sustainable.”

The sustainability of funding is another enabling factor to enhance the impact of early intervention services delivered by ACCOs. Stable funding over longer periods of time supports ACCOs to foster relationships and trust with their clients and broader community which are key factors in achieving outcomes (as discussed at 3.4.1). Further, cultivating community and client-led, self-determined programs take time. Funding should support ACCOs to grow their programs in a way that nurtures this and builds on lessons learned.

Our position is that more funding must be redirected from OOHC to TEI, for more investment into early intervention. The Family Matters Report 2024 revealed that only 15 percent of government funding is spent on prevention programs with the overwhelmingly large remainder spent on child protection and OOHC.¹ With Aboriginal and Torres Strait Islander children comprising 46 percent of all children in OOHC, despite making up only 8 percent of the total child population in Australia, there is a clear need for further investment in early intervention to support Aboriginal children and families.²

¹ SNAICC– National Voice for Our Children, Family Matters Report (2024).

² FACSIR presentation, Key Trends in Child Protection and Out-of-home care (OOHC) in NSW, May 2025 (AbSec Quarterly Sector Forum) reflecting figures for year ending 30 June 2024.

Position six: Building the Aboriginal Community-Controlled sector is critical to achieving DCJ's 30 percent target.

The NSW Government committed to ensuring at least 30 percent of early intervention services are delivered by ACCOs in 2017. This is a critical goal reflecting the voices of many Aboriginal people, communities, and services and is essential to reducing the disproportionately high number of Aboriginal and Torres Strait Islander children in OOHC and closing the gap. This goal can only be achieved through deliberate, long-term investment by DCJ and a focus on building the capacity of the ACCO sector.

Sector development through long-term investment and partnership

ACCOs are eager to lead early intervention services for their communities. However, many are doing so without adequate infrastructure, stable funding, underdeveloped administrative systems and under resourced workforces. These barriers are significant for ACCOs wanting to enter the early intervention space and those who want to scale up their existing service delivery. Where services already exist and are demonstrating good practice, they should be supported to grow. Where there are gaps, communities should be supported to develop new ACCOs through infrastructure, mentoring and capability development.



“You can’t meet a 30 percent target without walking with the sector—building it from the ground up.”

Consultation participants expressed that capacity-building is not just about funding, but about genuine partnership and hands-on support from DCJ. This includes taking time and working alongside ACCOs – providing mentoring, building relationships and providing guidance in early commissioning stages to build local service models from the ground up.

“We’ve got the knowledge and the passion—we just need the backing to grow.”

Some ideas from ACCOs included:

- Providing support with the co-design of service models, tendering, grant-writing and implementation or transition funding.
- Investing in workforce development, governance and communities of practice.
- Supporting emerging ACCOs through incubation models, shared workforce and infrastructure.

Aboriginal OOHC Capacity Building as a model for success

One successful example to follow is the capacity building undertaken by DCJ with AbSec’s support prior to the Aboriginal OOHC Transition Project, which commenced in 2012. This initiative was established to support transferring statutory child protection support from mainstream providers to Aboriginal organisations. Considered efforts were made to build ACCOs capacity with targeted funding in regions based on their needs. DCJ provided direct funding of infrastructure, training, governance development and peer-to-peer learning to ensure that the sector was ready to take on the transition, which continues today. While this transition continues to require support and funding, many existing ACCOs have built their capacity to provide OOHC to increased numbers of children and other new ACCOs have been established and supported to become authorised OOHC providers.

This model represents, what could be, a blueprint for the early intervention space. As previously mentioned, current processes favour established processes currently favour established and well-resourced organisations, and this is currently failing to increase the proportion of services delivered by ACCOs.

A realistic and strategic capacity-building plan is needed

Many ACCOs express scepticism that the 30 percent target will be met without a clear, realistic and well-funded plan. Without such a plan, the perception among our sector is that the NSW government will not redirect any funding towards ACCOs and that little investment will be made to realise this goal. The recent AbSec Quarterly Sector Forum saw many participants express that this target is little more than lip-service, highlighting the need for clear and honest dialogue with the ACCO sector.

To turn the 30 percent target into a reality, it must be grounded in an implementation plan co-designed with the ACCO sector. This involves mapping existing ACCO capability across NSW, ensuring Aboriginal governance and leadership throughout the process, making targeted investments and using policy and system-level enablers to allow growth. For example, through flexible contracts, longer commissioning cycles, and culturally appropriate outcomes frameworks. The development of Aboriginal-led services where they do not yet exist must be encouraged, alongside further supports, such as the investment of time and money, for promising models. Finally, existing ACCOs that have been, and continue to, lead in our sector must be supported to upscale and share their knowledge and practice where they can.

Ultimately, the success of the CFS program depends on whether ACCOs are invested in and therefore supported to lead in their communities. This requires a structural shift in how government works with our sector and must be backed by genuine partnership, commitment, planning and investment.

Recommendations

To ensure the success of the new CFS program and achieve the NSW Government's 30 percent ACCO commissioning target, AbSec recommends the following systemic changes and service design reforms.

Commissioning reform

- Co-design and implement partnership-based models that prioritise community knowledge and collaboration over competition.
- Empower local DCJ offices to lead commissioning in partnership with ACCOs and community representatives.
- Provide pre-tender support and relationship-building processes, particularly for smaller or emerging ACCOs.
- Embed Aboriginal decision-making authority and representation at all stages of commissioning and evaluation.

"Stop consulting after the contract is written. We need to be part of designing the work, not just delivering it."

Funding and investment

- Redirect funding from statutory systems such as OOHHC into upstream prevention led by ACCOs.
- Fund brokerage, transport, specialist supports and other enablers to allow ACCOs to deliver wrap-around services.
- Ensure base funding reflects the full cost of delivering place-based, culturally safe and holistic support.

"We're filling the gaps between government programs—using our own resources, running on goodwill. But that's not sustainable if you want real outcomes."

Outcomes, reporting and accountability

- Shift from a focus on outputs to outcomes, co-designing outcomes frameworks with ACCOs that reflect ACCO definitions of success.
- Enable ACCOs to supplement DEX reporting with qualitative narratives, stories, case studies and culturally meaningful indicators.
- Reduce administrative burden by simplifying contract requirements and recognising informal, relational work.
- Tailor reporting expectations for small and remote ACCOs to reflect the practical realities of service delivery in community.

"We're storytelling people. Our outcomes are in the journey, not just the destination. Let us report in our way."

Support Aboriginal sector growth

- Co-design and resource an implementation plan to achieve the 30 percent ACCO commissioning target, with clear timeframes and accountability.
- Provide capacity-building grants, transitional funding and hands-on support for ACCOs seeking to establish or expand early intervention programs.
- Invest in workforce development, shared infrastructure, mentoring and governance across the Aboriginal sector.
- Support established ACCOs to expand and incubate new services, particularly in under-serviced areas.

"You want 30 percent by 2026? Then start investing now—in the ones already doing the work, and in the ones who could."

Program and system design reform

- Invest in mapping and documenting Aboriginal-led models of early intervention to guide future commissioning and policy development.
- Update service types and eligibility criteria to include Aboriginal concepts of family, kin, and cultural support.
- Align CFS, Family Preservation and statutory child protection to streamline service commissioning and improve continuity of service delivery and collaboration.
- Support ACCOs to develop their own service models to reflect holistic, relational and culturally grounded ways of working.

"We don't work in silos. Our families don't live in silos — but DCJ programs are split up like that. It makes no sense on the ground."



Conclusion

This position paper and the attached case studies demonstrate that ACCO-led early intervention support is the most effective response for Aboriginal children and families. ACCOs need to be supported by a system that trusts, resources and partners with ACCOs to empower them to lead service delivery.

The transition to the CFS Program in 2026 presents a timely opportunity to reshape the early intervention service system to one that aligns better with the needs of Aboriginal communities and to take real steps towards achieving the goal of 30 percent of early intervention supports being delivered by ACCOs. However, this will only be achieved if DCJ honours its commitment to working in genuine partnership with the Aboriginal community-controlled sector and by developing and investing time and funding in a structured plan to achieve this goal.

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“If you really want to make change, you have to walk with us—not ahead of us, not behind us.”

AbSec Position Paper

Case studies



Image credit: South Coast AMS YouTube

South Coast Medical Service Aboriginal Corporation: TEI and FCS service delivery

South Coast Medical Service Aboriginal Corporation (SCMSAC) has served the Shoalhaven region since 1982, providing culturally safe health, wellbeing, and family support services to the local Aboriginal community. In more recent years, SCMSAC also provides services in the Illawarra, Far South Coast and Southern regions. SCMSAC delivers primary healthcare and a range of wrap-around services for Aboriginal people and families, from social and emotional wellbeing supports to child and family services and out-of-home care (OOHC). SCMSAC are also the only ACCO in NSW to deliver the FCS service alongside their TEI service, and this case study highlights how these two services work alongside each other.

South Coast Medical Service Aboriginal Corporation TEI and FCS services

South Coast Medical Service Aboriginal Corporation provides complementary TEI and FCS services (in the Shoalhaven and Illawarra), both designed to strengthen families, prevent statutory child protection involvement, and promote overall health and wellbeing.

The SCMSAC TEI service offers case management for families, with flexible support typically over six months, with cases able to be re-referred to the service if needed. SCMSAC's dedicated TEI caseworkers are carefully matched with people and families based on their needs. They then identify and work towards self-defined goals, provide advocacy, warm referrals, transport assistance, parenting programs, and help to navigate complex service delivery systems. TEI funding also supports SCMSAC to deliver parenting programs, cultural and social support and community events.

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“Families come to us because they trust us — they know we’ll walk with them, not judge them.”

The FCS service acts as an initial contact and referral service, helping families navigate complex systems and connect them with the supports they need. The SCMSAC team have worked hard to develop a strong network of culturally safe and trusted local services to whom they can refer clients. FCS is often an entry point to broader supports, and some clients can then be smoothly referred to other SCMSAC services, including the TEI service.

“FCS might be the front door, but TEI is where we get to build the longer relationship. Together they make the difference.”

The integrated model allows families to build and hold trust with SCMSAC, benefiting from its “one-stop” community feel.

Strengths

SCMSAC’s TEI and FCS service delivery is underpinned by their trust with community, family-led practice and strengths-based approach, focused on building confidence. Local Elders and well-respected community members lead service design and delivery ensuring that community and culture is embedded and not just conceptual. Staff go above and beyond to build trust and walk alongside people, often visiting families at home and taking them to services. Further, SCMSAC’s one-stop-shop model ensures that local people and families can walk in and access a range of supports and be smoothly referred to services they need without having to retell their story. Through 2023–2024, SCMSAC’s TEI service provided case management to 211 individuals, with over 2,200 support sessions.

A 43-year-old-single mother of two daughters, 7 and 9, reached out to SCMSAC through the FCS program after finding information online. Facing mental health challenges and seeking to relocate closer to family and community, Monica was supported by FCS to access housing assistance, brokerage funds through another service for property maintenance, and moving costs. She successfully transferred her housing to the Shoalhaven and enrolled her daughters in a local school, with referrals for paediatric support and additional services.

When further support was needed, Monica transitioned into the TEI program. Today, Monica and her daughters live in a stable home, are connected to the local community, and continue to engage with services to support their social and emotional wellbeing.

“That mum had every door slammed in her face — but when she got to us, she found people who believed in her.”



Image credit: South Coast AMS YouTube

Challenges

Despite the success of their early intervention services, SCMSAC workers are stretched and there are never enough resources to keep up with the high demand. Staff reported regularly seeking out resources from other services due to TEI not having any brokerage attached to the program. Despite increasing demand, their TEI program has not been funded to grow in 20 years. They also recognise the need for building the local service sector as clients are often referred and must wait to receive support or cannot find it at all. Often staff drive clients to Wollongong or Sydney for appointments, ensuring their clients have access to the services they need – no matter whether TEI funding covers it. Like many organisations, SCMSAC feel reporting systems like DEX do not capture this intensive and complex additional support that ACCOs provide to community.

“You can’t put this kind of work into a spreadsheet — how do you measure trust, or a child feeling safe again?”

Learnings

SCMSAC experience shows that the combining of TEI and FCS programs works well, which supports the merging of the two programs under the new CFS program. It also suggests that the child and family service systems would benefit from further streamlining and alignment. The SCMSAC case study shows that investment in brokerage and practical funds will make a significant difference and that investment in ACCO-led models works but needs to be further supported by DCJ to meet community demands.



Image credit: muloobinba.org.au

Muloobinba Aboriginal Corporation: TEI service delivery

Muloobinba Aboriginal Corporation is a well-established ACCO serving the Newcastle and Lake Macquarie regions since 1991. Muloobinba provides a range of services and programs for the Aboriginal community, with a particular focus on children, young people, and families, across five locations, including the Nikinpa Aboriginal Child and Family Centre located in West Lake Macquarie.

Muloobinba's TEI Services

Muloobinba use their TEI funding to provide flexible, culturally responsive support to Aboriginal families with a strong focus on healing and connection to community, supporting people to build their confidence and capacity. Services are family-led and delivered through a relationship-based model that enables staff to walk alongside families at their own pace.

At the core of Muloobinba's TEI support is a casework and family support service, which provides goal-based case management with regular home visits, warm referrals and capacity building. Many of these clients also participate in Muloobinba's parenting programs and supported playgroups for children. These are offered in Newcastle and Nikinpa. The Nikinpa Aboriginal Child and Family Centre in West Lake Macquarie, partially funded through TEI, is a welcoming, culturally safe space that provides childcare, preschool, early childhood health, mental health services, and community programs. Staff described the Child and Family Centre as a place for locals to gather, feel safe and seen and access supports that otherwise do not exist.

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Nikinpa isn't just a service hub — it's a place of belonging, healing, and connection to culture.”

TEI funding also supports community members to participate in men's and women's groups, art groups, community dinners and cultural events to build a sense of community and encourage connection. The organisation's youth centre also provides mentoring, education and employment support and after-school programs. Some programs target youth involved with the justice system, while others are focused on diversion.

Strengths

One of the strengths of Muloobinba's TEI service delivery is its flexibility. The organisation offers diverse flexible supports to meet community needs through TEI funding, from structured casework to a simple cuppa with Elders. Unlike some ACCOs, they felt they were able to get creative and be responsive.

"Some families start with a playgroup, others with a crisis. Wherever they are, we meet them there."

Their service delivery is built on trust and carefully nurtured relationships with community members and other services. Culture is embedded through the guidance of Aboriginal staff with deep ties to the local communities. Nikinpa has also been a success story as a place-based and holistic community hub, where people of all ages come for connection and support.



Image credit: muloobinba.org.au

Challenges

Muloobinba reported feeling that there is a misalignment between the program design and contracting and reporting needs. Staff found that the TEI program logic and their reporting in DEX are both burdensome but also not accurately capturing the full scale of their work. This includes the intense relational and cultural support and community-building. Additionally, while the organisation values the flexibility of TEI, they report that contracting and performance monitoring are overly complex and demanding.

TEI funding only represents a small portion of Muloobinba's funds, and the services provided through TEI are often stretched as demand exceeds resources. This means that they often must cap and scale back activities.

Learnings

Muloobinba's TEI service delivery highlights the importance of flexibility in the space as many people and families need a range of supports and not a one-size-fits-all model. The Nikinpa Aboriginal Family & Child Care Centre also shows that investing in infrastructure and space for Aboriginal communities is critical to building healthy communities and connection, one of the key objectives of TEI.

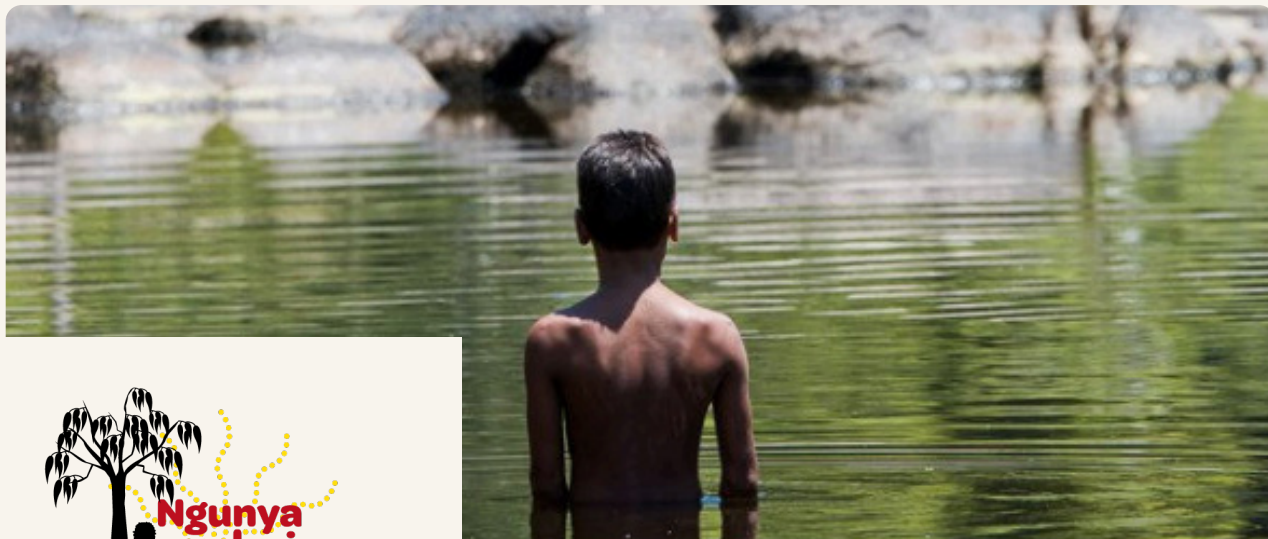


Image credit: Ngunya Jarjum 2023 Annual Report

Ngunya Jarjum Aboriginal Corporation: TEI service delivery

Ngunya Jarjum Aboriginal Corporation (Ngunya Jarjum) has operated for over 30 years on Bundjalung Country, based in Lismore. Originally focused on OOHC, Ngunya Jarjum has expanded its services to include early intervention and prevention, recognising the need to support families before crisis occurs. Their approach is guided by cultural values, community voice, and a commitment to keeping children connected to kin, Country and culture.

Ngunya Jarjum's TEI service

Ngunya Jarjum's TEI service is relatively new but growing steadily, now servicing—Richmond Valley, Kyogle and Tenterfield with focus areas of Tabulam, Jubullum Village and Coraki—geographically isolated areas which face significant social and economic challenges.

Ngunya Jarjum's TEI team works closely with families to provide culturally safe casework and family support. The team often works with individuals to achieve feasible and meaningful goals that make a difference in their lives, including obtaining driver's licenses and white cards, and support finding employment. TEI also funds a range of community development activities, which are particularly valuable in the remote communities they serve. This includes community events, movie nights and cultural activities, which are building community pride and optimism.

Recognising their limited funding by DCJ, Ngunya Jarjum have combined TEI funding with other funding to deliver playgroups and early childhood supports as well as youth programs, focused on reducing contact with the justice system and role modelling. Ngunya Jarjum also work with Landcare to have young people and community members supporting local gardens and building new skills.

Strengths

"When services are led by our mob, they reflect our values—culture isn't an add-on, it's the foundation."

Ngunya Jarjum's service delivery rests on strong cultural foundations and commitment to preserving culture and community. The organisation is led by Aboriginal people, with 86 percent Aboriginal staff, and their service delivery embeds culture, offering cultural camps and supporting

the community to preserve traditions such as turtle diving in the Northern Rivers. This approach has been particularly successful in the remote communities of Jubullum and Tabulam.

The TEI program is also well integrated with the organisation's other services, including Family Preservation and OOHC. This allows for a seamless continuum of care for families who require varying levels of support at different stages. Ngunya Jarjum are able to use a step up and step-down approach for clients within this care continuum, enabling them to provide more sustainable, longer-term support for families. The organisation views their ability to responsively step clients up and down between programs as a powerful tool to effectively meet the needs of the clients.



"Families don't need to start again. TEI lets us keep walking with them after restoration or OOHC support."

Challenges

Many of the communities served by Ngunya Jarjum face unique challenges, including geographical isolation, limited transport and a shortage of basic facilities and services. Ngunya Jarjum's TEI team make significant efforts to deliver valuable supports to their communities, often working extended hours and driving long distances, but continue to face limitations in staffing and resources to meet growing demand. Staff often need to provide material or practical supports (like transport or basic goods) to stabilise families, but DCJ funding does not always allow for this.

"Sometimes you just need to get a family a washing machine or a ride to an appointment—but the system doesn't fund that."

Like other ACCOs, Ngunya Jarjum also find that DCJ's reporting systems do not allow them to accurately tell the story of the significant work being done. Reporting systems also fail to capture cultural outcomes. Ngunya Jarjum specifically highlighted the lack of narrative-based reporting which they felt would better capture cultural outcomes for their clients and community.

Learnings

Ngunya Jarjum's TEI service highlights the unique challenge of serving smaller and more remote communities with limited resources and infrastructure. The Aboriginal communities served by Ngunya Jarjum's service, as well as other remote communities, are among those most in need of support. There is a clear opportunity to invest in supporting community building and positive outcomes through TEI to divert people and families from statutory intervention.



Photography credit: Central Western Daily

Orange Aboriginal Medical Service: Early intervention approaches outside TEI

Orange Aboriginal Medical Service (OAMS) is a long-standing ACCO delivering comprehensive, culturally safe primary health and social support services to Aboriginal families in Orange and surrounding areas. In addition to GP services, OAMS offers social and emotional wellbeing (SEWB), housing support, child and family services, and justice-related programs – working across the age spectrum from newborns to the elderly. Although OAMS does not receive TEI funding, its work in early intervention and family supports aligns closely with the objectives of TEI and the new CFS program.

OAMS IMR Wala-Ma-Nha-Yali-Nya (Strong Families) program

The Improving Multidisciplinary Responses (IMR) Wala-Ma-Nha-Yali-Nya (Strong Families) Program, funded through the Australian Government's Department of Social Services, aims to keep families strong, safe, and connected so children can grow up within family, culture, and Country. This is an inclusive program but 95 percent of clients are Aboriginal.

At its core, OAMS Strong Families Program is an early intervention program supporting families with complex needs with therapeutic casework and wrap-around supports. The program includes home visits, group programs, parenting support and case management with referrals and assistance to navigate services. Program staff can also coordinate health supports, helping families to organise and attend appointments and understand their health concerns and needs.

The Wala-Ma-Nha-Yali-Nya Program regularly assist families with accessing housing and advocating on their behalf with other services. This is critical as, like in many regional communities, accessing secure housing is a significant challenge for many families engaged in the program. The funding also provides valuable brokerage assistance. Brokerage funds are supporting families to travel to appointments and to access basic home goods, particularly when they move into new housing.

Strengths and learnings

OAMS IMR program offers valuable insights into what makes early intervention effective. DCJ can learn from the DSS commissioning model to improve the CFS program. This is supported by the program's success. As of February 2025, 89.5 percent of the families actively supported by the IMR program had not returned to the child protection system.

One of the key strengths of the IMR program is that culture is ever-present. There are a high proportion of Aboriginal staff, who support the delivery of many cultural programs and activities, such as child, men, and women-specific programs, as well as “return to Country” trips and corroborees.

A key enabler to these culturally appropriate supports is the flexibility of the IMR contract. This allows the IMR team to meet families where they are and tailor support as needed. This contrasts with the rigidity of the TEI service types and enables OAMS to be adaptable and provide more intensive support.

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“Flexibility means we can respond straight away — that’s what makes the difference when families are in crisis.”

The brokerage funding that OAMS receive is also a key enabler to providing quality support. IMR workers use brokerage flexibility to meet the immediate needs of families, including food, fuel, transport, clothing and school supplies. These help to stabilise families and support their engagement with services. Brokerage funding also provides an opportunity to work with families on financial skills, including budgeting and practical in-home skills like grocery shopping and cooking. The lack of accessible and sufficient brokerage funding through TEI was identified as a significant gap by many organisations. Having immediate, practical resources is often what makes it possible for families to take the first step toward change.

“Having brokerage means we can help families practically, and that opens the door to deeper support.”

Flexible funding models are important to support wraparound care, but OAMS also appreciate sustained investment and resourcing and advocate for DCJ to invest in longer contracts and capacity building with the ACCO sector to support early intervention. ACCOs need support to experiment and be led by community to determine what works.

“This program was built from the ground up, by our community, for our community. That’s why it works.”

DCJ can also learn from the commissioning of Wala Ma Nha Yali Nya, which was developed in direct response to community need. OAMS staff suggest that place-based planning and a co-design approach needs to be taken to make DCJ early intervention successful in Aboriginal communities. DCJ commissioning processes often feel top-down and disconnected from communities. ACCO communities of practice should be created to facilitate knowledge sharing and to improve DCJ’s understanding of community needs.

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“DCJ needs to invest in ACCOs and back community-led solutions— not just fund services but trust us to lead.”



Image credit: OAMS Facebook



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